FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 351146

(6)

SHANE - SUCHMAN REAL ESTATE CO.

FILED Apr 27 1998 8:00am Secretary of State

010 at 2 0001 at 1	THE LOTAGE OO				
Principal Place of Business	Mailing A	Mailing Address			r annyale firen arien jinner treit allein britt erfeit erfeit erfeit effet fillei elleit filleit
1550 MADRUGA AVE.		1550 MADRUGA AVENUE			
#230 #230 #230		L CADICC EL 99140			DO NOT WRITE IN THIS SPACE
CORAL GABLES FL 33146 CORAL GABLES FL 33146		GABLES FL 33146			3. Date incorporated or Qualified
••	00				08/22/1969
2. Principal Place of Busines	ss 2a. Maifir	ng Address			4. FEI Number Applied For
21	<u> </u>	26			59-1364685 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			SR 75 Additional
22 City & Ctoto	27	27			5. Certificate of Status Desired Fee Required
I Uity of State	City 8	City & State			Election Campaign Financing \$5.00 May Be
23 28					Trust Fund Contribution Added to Fees
ZID Country ZID		 	Country		8. This corporation owes or has paid the current year Intangible
24 25		30			Personal Property Tax due June 30. Yes No
	nd Address of Current Registered	Agent	81	1	10. Name and Address of New Registered Agent
OTARE,MARTIN II				Name	ne
1550 MADRUGA AVE.			82	Street	et Address (P.O. Box Number is Not Acceptable)
SUITE 230					
MIAMI FL 33146		83			
			84	City	85 Zip Code
			ļ	L	FL FL FL FL FL FL FL FL
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE					
12.	printed name of registered agent and title if applica OFFICERS AND DIRECTORS		3.	ent signature	fure required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE PD	OF FOLKIO ANTO OTTO CONTROL		1 TITLE		Change Addition
NAME SHANE,MA	ARTIN H		2 NAME		
AREO MADDILOS AVE CUITE COO				ADDRESS	22
CITY-ST-ZIP CORAL G			4 CITY-S		~
TITLE S			1 TITLE		Change Addition
NAME ROBERTS	, PETER A	2	2 NAME		
	RUGA AVE., SUITE 230	2	3 STREET	ADDRESS	SS S
CITY-ST-ZIP CORAL G			4 CITY-		
TITLE VD			1 TITLE		☐ Change ☐ Addition
NAME SUCHMAN, LAWRENCE E 3.2 N			2 NAME		
			3 STREET	ADDRESS	ss
CITY-ST-ZIP CORAL G	ables fl	a .	4. CITY-:	ST-ZIP	
TITLE			1 TITLE		Change Addition
NAME		4.	2 NAME		1
STREET ADDRESS		4.	3 STREE1	ADDRESS	ss
CITY-ST-ZIP		4.	4 CITY - S	T-ZIP	
TITLE		DELETE 5.	1 TITLE		Change Addition
NAME		5.	2 NAME		
STREET ADDRESS		5.	3 STREET	ADORESS	is
CITY-ST-ZIP			4 CITY-S	1-ZIP	
TITLE		☐ DELETE 6.	1 TITLE		Change Addition
NAME		6.	2 NAME		
STREET ADDRESS		6.	3 STREET	ADDRESS	ss
CITY-ST-ZIP		6.	4 CITY-S	T - ZIP	

1. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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