

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

FILED

Feb 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 356834 (2)
1. Corporation Name
MIAMI TRAIL LAND CO

Principal Place of Business
2600 SW 27TH AVE
MIAMI FL 33133

Mailing Address
2600 SW 27TH AVE
MIAMI FL 33133



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2053 SECOFFEE ST. Suite, Apt. #, etc.		2a. Mailing Address 26 2053 SECOFFEE ST. Suite, Apt. #, etc.		3. Date Incorporated or Qualified 12/15/1969	
22 City & State 23 MIA. FL.		27 City & State 28 MIA. FL.		4. FEI Number 59-2653618 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
24 Zip 33133		25 Country DADE		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
26 City & State 27 MIA. FL.		28 City & State 29 MIA. FL.		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
29 City & State 30 MIA. FL.		31 City & State 32 MIA. FL.		7. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent TAYLOR, ROBERT M 2600 SW 27TH AVE MIAMI FL 33133		10. Name and Address of New Registered Agent 81 Name RON BAKER 82 Street Address (P.O. Box Number is Not Acceptable) 4475 PONCE DE LEON BLVD. 83 # 301 84 City CORAL GABLES FL 85 Zip Code 33146	
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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 *[Signature]* DATE 1/24/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD TAYLOR, ROBERT M. 2600 SW 27TH AVE MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	SAME 2053 SECOFFEE ST. MIA. FL. 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S TAYLOR, MARY E 2600 SW 27TH AVE MIAMI FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	SAME 2053 SECOFFEE ST. MIA. FL. 33133
TITLE NAME STREET ADDRESS CITY - ST - ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	

14. I hereby 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 supplemental 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

SIGNATURE: *[Signature]* DATE 1/21/98 305-856-8080

CR2E034 (10/97)