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

CORPORATION ANNUAL REPORT

1998

2. Principal Place of Business

Suite, Apt #, etc.

21

22



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 359414

(0)

2a. Mailing Address

Suite, Apt. #, etc.

COMMODORE REALTY, INC.

13234					
Mailing Address					
51 SW 9 STREET					
MIAMI FL 33130-4135					

27

FILED Jan 29 1998 8:00am Secretary of State



Applied For Not Applicable

\$8.75 Additional

Fee Required

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 02/10/1970 4. FEI Number

59-1361256

5. Certificate of Status Desired

City & State	е		City & Sta	te				6. Election	Campaigr	n Financing	}	\$5	.00 i	Иау Ве	
23			28					Trust Fu	and Contrib	ution	\Box	Ad	ided to	Fees	
Zip		untry	Zip		Country	Country			poration ov	wes or has	paid the c	u <u>rre</u> nt ye	ar Inta	ngible	
24	25		29	3	0				al Property			Yes	<u> </u>	No	_
	9. Name and A	idress of Current	_			10. Name a	and Addres	ss of New	Registere	d Agent			_		
P	UYANIC,MAX D				81	Name									
5	1 SW 9 STREET				82	Street	Addres	ss (P.O. Box	Number Is	Not Accep	table)				╗
M	IIAMI FL 33130				83					·	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
					84	City						85	Zip C	ode	\dashv
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office or r	to the provisions of egistered agent, or m familiar with, and	both, in the State o	if Florida. Such ch	nange was aut	horized by	/ the cor	l corpor poration	ration submit n's board of d	s this state directors. I	ment for th hereby ac	e purpose cept the ap	of chang opointme	jing its nt as r	registere egistered	ਤੋਂ
SIGNATURE	Signature, typed or printed	name of registered agent	and title if annilcable	(NOTE E	Registered Age	ent signatur	e required	when reinstating)			DATE				-
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TITLE	V			DELETE	2.1 TITLE							Ch	ange	Additi	'n
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CITY-ST-ZIP	MIAMI FL				2. 4 CITY-5	ST-ZIP]								
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14. I hereby of indicated	certify that the inform on this annual repo	nation supplied with rt or supplemental varion or the receiv	n this filing does r annual report is tr	not qualify for true and accura nowered to ever	he exemp ate and the	tion state at my sig	ed in Se gnature s requir	ection 119.07 shall have th	7(3)(i), Flori ne same leg er 607 Flor	da Statutes gal effect a rida Statute	s. I further is if made i es: and the	certify the under oat timy nam	at the id th; that ne app	ntormatio : I am an ears in	`

Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

(305) 372-3777