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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 421565

(3)

Mailing Address

LONG PROPERTIES, INC.

Principal Place of Business

FILED Apr 14 1997 8:00am Secretary of State



1550 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146			1550 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146-3034						
						3. Date Incorporated or Qualified 03/19/1973	3a. Date of La: 05/01/199		
2. Principal F	Place of Business	2a. Mailing Add	2a. Malling Address			4. FEI Number		Applied For	
21		26	├			59-2703592		Not Applicable	
Suite, Apt.	. #, etc.		Suite, Apt. #, etc.			Continue of Chat in Declared	\$8.7	5 Additional	
22		27	27			5. Certificate of Status Desired	Fee	Required	
City & Stat	te	City & State				6. Election Campaign Financing	\$5.0	00 May Be	
23		28				Trust Fund Contribution	D Add	ed to Fees	
Zip	Country Zip		Country		8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30)]		1	Yes No		
101	9, Name and Address of Ci	urrent Hegistered Agent		81	Name	10. Name and Address of New Reg	Jisterea Agent		
LONG, DONALD H					1				
710 SAN JUAN DR.				82	Street Ado	Address (P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33143				83			 	· · · · · · · · · · · · · · · · · · ·	
				84	City		FL 85 2	ip Code	
11. Pursuant office or	to the provisions of Sections 607 registered agent, or both, in the	7.0502 and 607.1508, Flori State of Florida, Such char	ida Statutes, nge was auti	the above	e-named cor y the corpora	poration submits this statement for the po ation's board of directors. I hereby accep	urpose of changin t the appointment	g its registered as registered	
-	ат натива мин, апо ассери те с	ubligations of, Section Cor	.0505, FIORIG	ia Statute	ð	8 April	97		
SIGNATURE	Stonature, typed or printed name of register	ed agent and title if applicable	(NOTE: B	og stered Ag	ent signature requ	uired when reinstating)	DATE		
12.		S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12	
TITLE	P		ELETE	1.1 TITLE			☐ Chan	ge 🔲 Addition	
NAME	LONG,DONALD H.			1.2 NAME					
STREET ADORESS	710 SAN JUAN DRIVE			1.3 STREE	ADDRESS				
CITY-ST-ZIP	CORAL GABLES FL		·	1.4 CHY-3	ST - 7 P				
TITLE	8						Chan	ge	
NAME	LONG, ROSALBA O			2.2 NAME					
STREET ADDRESS	710 SAN JUAN DR.			2.3 STREET	ADDRESS				
CITY-ST-ZIP	CORAL GABLES FL			2.4 CITY-	S1-ZIP				
TITLE	LANA BANDAL D	∐ υ	ELETE	3.1 THEE			☐ Chan	ge []] Addition	
NAME	LONG, RANDAL D			32 NAME					
STREET ADDRESS	107 MINNEHAHA CR			3 3 51REE	}				
CITY-ST-ZIP	MAITLAND FL		ELETE	3 4. CITY-	ST-ZIP		Chan	ge Addition	
TITLE		ں ا	CLCIF	4.1 TITLE			ET CHAIN	a [] Wadaran	
NAME			į	4. 2 NAME	10000100				
STREET ADDRESS				4.3 STRFE					
CHY-ST-ZIP		——————————————————————————————————————	ELETE	4.4 CITY-S 5.1 TITLE	SI-ZIP		Chan	ge Addition	
TITLE 4		L.J 1/	LELIE.			•	OHAT!	go Lan Mudiciali	
NAME OTRECT ADDRESS				5.2 NAME	2210004				
STREET ADDRESS				5.3 STREET					
CITY-ST-ZIP		p	FLETE	5.4 CITY - 5 6.1 TITLE	51-ZIP		Chan	ne Addition	
TITLE		L 1/	LILIL				L DIKIL	Pe L'Addition	
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET					
CITY-ST-ZIP	Ī			6.4 CiTY - 9	ST-ZIP				

14. I do 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 logal effect as if made under eath; 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 Proof 13 if changed, or on an attachment with an address.

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(205) (((717)