PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 421565

LONG PROPERTIES, INC.

FILED Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90157 020 ***150.00



Principa Place of Business Mailing Address					
1550 SOUTH D	IXIE HIGHWAY	1550 SOUTH DIXIE HIGHWAY CORAL GABLES FL 33146			
CORAL GABLES FL 33146		COUNT CADES LE 33140			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualifed
					03/19/1973
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-2703592 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Cert fcate of Status Desired S8.75 Additional
22		27			Fee Required
City & State		City & State			6. Election Campaign Financing \$5.0() May Be Trust Fund Contribution Added to Fees
Zip Country		Zip Country			
		29 30			8. This corporation owes the current year Intangible Personal Property Tax.
24	9. Name and Address of Curre		301		10. Name and Address of New Registered Agent
	o. Hallo and F. Jaroge of Carre		81	Name	
LON	G, DONALD H		-	<u> </u>	de la constanta de la constant
710 SAN JUAN DR.			82	Street 40	ddress (P.O. Box Number is Not Acceptable)
COR	AL GABLES FL 33143		83		
					OF Zin Code
			84	City	- 85 Zip Code
11. Pursuant to the provisions of Sections 607.05/12 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature is quired when reinstation))					
12.		IID DIRECTORS	13.	1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Ρ	☐ ØELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	LONG,DONALD H.		1.2 NAME		
STREET ADDICESS	710 SAN JUAN DRIVE		13 STREET	ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL		1,4 CITY-S	r-ZIP	
TITLE	S	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	LONG, ROSALBA O		2.2 NAME		
STREET ADDITESS			2.3 STREET	ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL	ORAL GABLES FL 24		T-ZIP	
TITLE	T	☐ DELETE	3.1 TITLE		T
NAME	LONG, RANDAL D		3.2 NAME		Long, Randal D.
STREET ADDF ESS	-1390 SW- 73RD- C T		3.3 STREET ADDRESS		6358 Old Mahogany Ct.
CITY-ST-ZIP	MIAMI-FE-33158		3.4. CITY-S	T-ZIP	Naples, F1. 34109-7818
T/ΠLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME	}	
STREET ADDRESS			4.3 STREET	i	
CITY-ST-ZIP		□ BELETE	4.4 CITY-S1	Γ-2iP	☐ Change ☐ Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		Change Addition
NAME			5.2 NAME	LAUUBESS	
STREET ADDRESS	•		5.4 CITY-S	ļ.	
CITY-ST-ZIP		□ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE		□ VELETE	6.2 NAME		
NAME			6.3 STREET	ADDRESS	
STREET ADDR :SS			64 CITY-ST-ZIP		
CITY-ST-ZIP	l		04011173		

CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0"(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 path; that I am an officer or director of the supportation 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, with all other like empowered.

SIGNATURED

Brall H. Long
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

23 April 99

(305)666-7171