## 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 # 438942

(5)

Principal Place of Business	Mailing Address
910 N.W. TENTH PLACE FT. LAUDERDALE FL 33311	910 N.W. TENTH PLACE FT. LAUDERDALE FL 33311

## **FILED** May 06 1998 8:00am Secretary of State

**CROWN PROPERTIES & CONSTRUCTION CORP.** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/29/1973 2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For 59-2015263 26 Not Applicable Sulte, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country 8. This corporation owes or has paid the current year Intengible 24 29 Personal Property Tax due June 30. 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROSENTHAL, ALAN S TURNBERRY PLAZA, STE, 500 82 Street Address (P.O. Box Number is Not Acceptable) 2875 N.E. 191ST ST **AVENTURA FL 33180** 83 City Zip Code 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. Hereby accept the appointment as registered agent. Ham familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** Signature, typed or printed name of registered agent and title diapplicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1,1 TITLE KASSAL.STANLEY NAME 1.2 NAME 393 CENTER ISLAND STREET ADDRESS 1.3 STREET ADDRESS **GOLDEN BCH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE ROSENTHAL ALAN S. 22 NAME 2875 N.E. 191ST , STE, 500 STREET ADDRESS 2.3 STREET ADDRESS AVENTURA FL CITY-ST-ZIP 2.4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE ☐ Change Addition WELLS, RAQUEL 3.2 NAME 2875 N.E. 191 ST., STE, 500 STREET ADDRESS 3.3 STREET ADDRESS **AVENTURA FL** CITY-ST-ZIP 3.4. CITY - \$1 - ZIP DELETE Addition TITLE 4.1 TITLE Change **BROOKS, RAY** NAME 4. 2 NAME 10484 N.W. 3RD ST STREET ADDRESS 4.3 STREET ADDRESS **PLANTATION FL** CITY-ST-ZIP 44 CHY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. Thereby certify that the information supplied with this filling 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.