

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

FILED
Jan 23 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 # 510278 (5)
1. Corporation Name
MORGAN INTERNATIONAL REALTY, INC.

Principal Place of Business
5550 LA GORCE DR
MIAMI BEACH FL 33140

Mailing Address
5550 LA GORCE DR
MIAMI BEACH FL 33140



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 2000 Biscayne Blvd. 22 Suite, Apt. #, etc. City & State 23 Miami, Florida Zip 24 33137 Country 25 USA		2a. Mailing Address 26 Suite, Apt. #, etc. City & State 27 Zip 29 Country 30		3. Date Incorporated or Qualified 08/10/1976 4. FEI Number 59-1687703 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MORGAN, RAYMOND
2008 BISCAYNE BLVD.
MIAMI FL 33137

81 Name
Connie Munoz
82 Street Address (P.O. Box Number is Not Acceptable)
1250 N.E. 125 Street
83 Apartment 0212
84 City
Miami
FL
85 Zip Code
33161

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 *Connie Munoz* Connie Munoz

1/12/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	Secretary
NAME	WEBB-MORGAN, GIOCONDA	1.2 NAME	Gioconda Morgan
STREET ADDRESS	2125 BISCAYNE BLVD	1.3 STREET ADDRESS	5550 La Gorce Dr.
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami Beach, FL 33140
TITLE	S	2.1 TITLE	
NAME	ZAMBRANO, LORENA	2.2 NAME	
STREET ADDRESS	19919 NW 53RD CT	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	000002410030
NAME		6.2 NAME	-01/23/98--01030--012
STREET ADDRESS		6.3 STREET ADDRESS	***150.00
CITY-ST-ZIP		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:

Gioconda Morgan Gioconda Morgan

1/12/98

(305) 867-7776

CR2E034 (10/97)