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FILED

Feb 12 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 527852 (8)

1. Corporation Name
STANDARD PROPERTIES, INC.



Principal Place of Business

Mailing Address

10250 SW 58 ST
SUITE 206
MIAMI FL 33165

10250 SW 58 ST
SUITE 206
MIAMI FL 33165

2. Principal Place of Business

2a. Mailing Address

21 14411 S. Dixie Hwy.

26 14411 S. Dixie Hwy.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 206

27 Suite 206

City & State

City & State

23 Miami, Florida

28 Miami, Florida

Zip

Country

Zip

Country

24 33176

25

29 33176

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

03/15/1977

3a. Date of Last Report

03/12/1996

4. FEI Number

59-1740385

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

10. Name and Address of New Registered Agent

FAGEN, MILDRED
10250 SW 58 ST
SUITE 206
MIAMI FL 33165

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

14411 S. Dixie Hwy.,

Suite 206

84 City
Miami

FL

85 Zip Code
33176

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME PD
FAGEN, MILDRED, H
10250 SW 58 ST
SUITE 206
MIAMI FL 33165

TITLE ☐ DELETE

NAME SD
KING, WILLIAM P.
10250 SW 58 ST
SUITE 206
MIAMI FL 33165

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY - ST - ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 14411 S. Dixie Hwy., Suite 206

1.4 CITY - ST - ZIP Miami, Florida 33176

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS 14411 S. Dixie Hwy., Suite 206

2.4 CITY - ST - ZIP Miami, Florida 33176

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - 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 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 that person is in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Mildred H. Fagen

2-6-97

(305) 253-3525

Date

Daytime Phone #

CR2E034 (9/96)