FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00 **FILED PROFIT** Apr 08 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #**1. Corporation Name (8)STANDARD PROPERTIES, INC. Principal Place of Business Mailing Address 1441 SO DIXIE HIGHWAY 14411 SO DIXIE HGHWY. **STE 206 STE 206** DO NOT WRITE IN THIS SPACE MIAMI FL 33176 **MIAMI FL 33176** 3. Date Incorporated or Qualified 03/15/1977 2. Principal Place of Business 2a. Mailing Address Applied For 59-1740385 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible 25 24 X Yes 29 Personal Property Tax due June 30. 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FAGEN, MILDRED FAGEN, MILDRED 10250 SW 56 ST Street Address (P.O. Box Number is Not Acceptable) SUITE D-101 14411 S. Dixie Hwy., Suite 206 83 **MIAMI FL 33165** Miami 84 City 85 Zip Code 697.05)2 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered by Gtaty of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered obligations of, Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of Sections office or registered agent, or open of agent. I am familiar with, april 1999 ep. Mildred H. **SIGNATURE** Signature, type 12. OFFICERS AND DIRECTORS DELETE TITLE 1.1 TITLE NAME FAGEN, MILDRED, H 1.2 NAME 14411 SO DIXIE HGHWY. STE 206 STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME KING, WILLIAM P. 2.2 NAME 14411 SO DIXIE HIGHWY STE 206 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE Change Addition 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE 51 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby 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 of supplementa 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 of the procedure of 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 changes a datactiment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 Crty-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

Mildred H. Fagen

4-2-98

(305) 253-3525

Change

Addition