

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

FILED

Mar 02 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 # **546997** (8)

1. Corporation Name
SPACE BUILDERS AND PLANNERS, INC.

Principal Place of Business
**640 N.W. 133RD ST.
NORTH MIAMI FL 33168**

Mailing Address
**640 N.W. 133RD ST.
NORTH MIAMI FL 33168**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 09/03/1977	
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-1765104		Applied For Not Applicable	
22 City & State	27 City & State	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip	28 Country	29 Zip		30 Country	
24	25	29	30	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**OPSTAL, GERARD
965 NW 132ND ST
NORTH MIAMI FL 33168**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
FL 85 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. 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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	OPSTAL, GERARD		1.2 NAME		
STREET ADDRESS	965 NW 132ND ST		1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	OPSTAL, HOOGENSTIJN M.		2.2 NAME		
STREET ADDRESS	965 NW 132ND ST		2.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	OPSTAL, NEL		3.2 NAME		
STREET ADDRESS	965 NW 132ND ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI FL		3.4 CITY-ST-ZIP		
TITLE	OPST	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	AL, MARCEL G		4.2 NAME		
STREET ADDRESS	975 NW 132 STR		4.3 STREET ADDRESS		
CITY-ST-ZIP	NO MIAMI FL		4.4 CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	OPSTAL, MAURICE A		5.2 NAME		
STREET ADDRESS	975 NW 132 STR		5.3 STREET ADDRESS		
CITY-ST-ZIP	NO MIAMI FL		5.4 CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
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:

[Signature]

2/21/98

CR2E034 (10/97)