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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

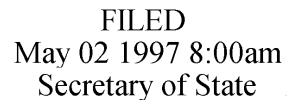
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(6)

DOCUMENT # 575721

CAMI PROPERTIES, INC.





Priricipal Place of Business Mailing Address % DAVID DARLOW % DAVID DARLOW 1111 LINCOLN ROAD, SUITE 500 1111 LINCOLN ROAD, SUITE MIAMI BEACH FL 33139 MIAMI BEACH FL 33139-2491						1 104151 SING 10550 SING 15010 21501 1151 SISM SISM SISM SISM SISM SIZM SIZM SIZM				
						3. Date Incorporated or Qualified 06/14/1978 3a. Date of Last Report 04/18/1996				
2. Principal Pt	lace of Business	2a. Mailing Address 26				4. FEI Number 65-0498555			oplied For of Applicable	
Suite, Apt.	#, etc.	Suite, Apt #, etc.	······································			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional	
City & State	D	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country Zip			ntry		8. This corporation has liability for	ration has liability for intangible tax under s. 199.032,			
24	25] g. Name and Address of Curr	29 29 Accept	30			Florida Statutes L 10. Name and Address of New Re		No Agent		
DAD	LOW, DAVID	eur rießiereien Wähilt		81	Name	IN HAIR AND WARRES OF HOR IN	-Air-raidh	Anıı		
1111 LINCOLN ROAD, SUITE 500				82	Street Addre	Street Address (P.O. Box Number is Not Acceptable)				
MIAI	MI BEACH FL 33139			B3			,			
				64	City			85 Zip (Code	
				3	Oity		FL	55 Zip \	5008	
office or r agent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obt	502 and 607,1508, Florida Statu te of Florida, Such change was igations of, Section 607,0505, Fl	les, the at authorize orida Stat	oove d by utes	the corporation	oration submits this statement for the on's board of directors. I hereby acce	purpose of pt the app	changing it ointment as	s registered registered	
	Signature, typed or printed name of registered a	Ager	ni signalure require	d when reinstating)	DATE					
12.	OFFICERS AND DIRECTORS PSTD DELETE		13.	n E		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR Change	RS IN 12 Addition	
NAME	DARLOW, DAVID	DELETE	12 N/	-				Change	L. Addition	
STREET ADDRESS 1111 LINCOLN ROAD, SUITE 500			1.3 STREET ADDRESS						Ì	
CITY-ST-ZIF	MIAMI BEACH FL 33139		1.4 CI	TY-SI	T- 21P					
TILLE	DELETE			2.1 TITLE				Change	Addition	
NAME	2		2.2 N	2.2 NAME						
STREET ADDRESS			2.3 \$1	REET	ADORESS					
CITY - S1 - ZIP				2. 4 CITY-ST-ZIP				I l Ohanna	4 4400	
TITLE		DELETE	3.1 10		İ			Change	L. Addition	
NAME			3.2 N/		1000F00			-	Ì	
STREEL ADDRESS DITY-ST-ZIP					ADDRESS				i.	
TITLE	· · · · · · · · · · · · · · · · · · ·	☐ DELETE	3.4. C 4.1 T(11-24			Change	Addition	
NAME			4. 2 N							
STREET ADORESS					ADDRESS	•				
CITY-ST-ZIP					T- Z iP					
TITLE		DELETE	5.1 Ti					Change	Addition	
NAME			5.2 N	ME			-	: •	}	
STREET ADDRESS			53 ST	REET	ADDRESS					
CITY-ST-Z/P			5.4 CI	TY-5	T-21P	· · · · · · · · · · · · · · · · · · ·				
TITLE		☐ DELETE	6.1 TI	TLE	T			Change	Addition	
NAME			6.2 N	ME			•			
STREET ADDRESS			6.3 \$1	REET	ADDRESS				·	
CITY-ST-ZIP			6.4 CI	TY-S	T-21P					

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 changed, or my an attachment with an address.

SIGNATURE: