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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary	OI	State	

**FILED** 

Mar 09 1998 8:00am

1. Corporation	NEN # 60719 NG MALL INVESTMENTS,	` '			
Principal Place	Principal Place of Business Mailing Address			I MEDITE CITIL CHILL SECON ISBUS CERTS CHILS CONTROL OF STATE	TIBLE AIAIL DIGIT INDA
2222 PONCE DE LEON BLVD. 2222		2222 PONCE DE LEON	BLVD.		
PENTHOUSE		PENTHOUSE SUITE	^4	DO NOT WRITE IN THIS SPAC	ie.
CORAL GABLE	:S FL 33134	CORAL GABLES FL 331	34	3. Date Incorporated or Qualified	
				01/19/1979	
2. Principal Place of Business 2a. Mailing Address		•	4. FEI Number	Applied For	
26		26		85-0275629	Not Applicable
Suite, Apt. #, etc		Suita, Apt. #, etc.		# Contificate of Status Desired	B.75 Additional
27		City & State			Fee Required
	City & State				5.00 May Be
23	Country	28]	Country		Added to Fees
Zip	- · ·	Zip	30	8. This corporation owes or has paid the current y Personal Property Tax due June 30.	
24	25 Same and Address of Curr	29 ent Registered Agent	[30]	10. Name and Address of New Registered Agen	
EIN	E, JEFFREY M.		81 Name		
	O BLUE LAGOON DR		62 Street Add	dress (P.O. Box Number is Not Acceptable)	
	TE 250		92 Stiedt Adi	dress (P.O. Box Number is Not Acceptable)	
	MI FL 33126		63		
•	/ 5 05 /50		84 City	<b></b> 85	Zip Code
			1 1 " "	FLI	,
SIGNATURE	egistered agent, or both, in the Sta n familiar with, and accept the obl		authorized by the corporational Statutes.  TE Registered Agent signature required.	proration submits this statement for the purpose of char ation's board of directors. I hereby accept the appointm 	ient az tegistered
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIR	ECTORS IN 12
TITLE	VD	☐ DELETE	1.1 TITLE		Change Addition
NAME	GUILFORD, FRANK W JR		1.2 NAME		
STREET ADDRESS	2222 PONCE DE LEON BL	<i>I</i> D. PENTHOUSE	1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL		1.4 CITY-ST-ZIP		01
TITLE	STD	☐ DELETE	2.1 TITLE		Change
NAME	FINE, JEFFREY	ATP AFA	2.2 NAME		
STREET ADDRESS	5200 BLUE LAGOON DR., S	SIE 250	2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL P	DILETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
TITLE	MCCOLLUM, PHILLIP W				Yuduğu 🗀 Münüğü
NAME PERCET ADDRESS	750 CHAMISAL RD NW		3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS	ALBUQUERQUE NM				
CITY-ST-ZIP TITLE	VEDORATURAL INI	DELETE	3.4. CHY-ST-ZIP 4.1 TITLE	<b>[</b> ] {	Change
NAME		Line Deceile	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City-ST-7IP			4.4 CITY-ST-ZIP		
TITLE	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CiTY-ST-ZIP		
TITLE	<del></del>	DELETE	61 TIFLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby d	ertily that the information supplied	with this filing does not qualify		in Section 119.07(3)(i), Florida Statutes. I further certify	that the Information

indicated on this armual report or supplied with this ming doors not quality for the exemption stated in Section 119.07(5)(f), Florida Statutes. I further certify that have and accurate and that my signature shall have the same legal effect as if made under oath; that have an officer or director of this corporation of the regulator 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 changes for an artischippen with an address.

Frank W. Guilford, Jr.

(305) 446-8411