


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

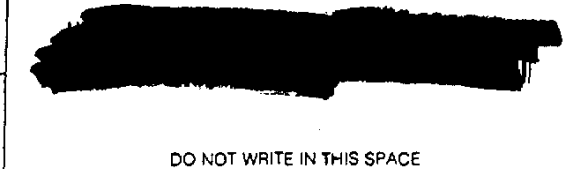
FILED
Jul 22 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 624122 (8)

1. Corporation Name
FIGUEROA LAND DEVELOPMENT, CORP.

Principal Place of Business 525 S.W. 68TH AVENUE MIAMI FL 33144	Mailing Address 525 S.W. 68TH AVENUE MIAMI FL 33144
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/08/1979	
21	22	26	27	4. FEI Number 59-2723363	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23	24	28	29	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	
Zip	Country	Zip	Country		

9. Name and Address of Current Registered Agent FIGUEROA, JOHN F. 525 S.W. 68TH ST. MIAMI FL				10. Name and Address of New Registered Agent			
				81 Name	JUAN A. FIGUEROA, P.A. C.P.A.		
				82 Street Address (P.O. Box Number is Not Acceptable)	300 SEVILLA AVENUE, #309		
				83			
				84 City	CORAL GABLES	FL	85 Zip Code 33134

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: *Juan A. Figueroa* DATE: 3/10/98

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	FIGUEROA, JOHN F.		1.2 NAME	FIGUEROA, FERNANDO			
STREET ADDRESS	525 S.W. 68TH AVE.		1.3 STREET ADDRESS	5235 SW 101 AVENUE			
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP	MIAMI, FL - 33165			
TITLE	TSD	<input checked="" type="checkbox"/> DELETE	2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FIGUEROA, PETRA ELLA		2.2 NAME				
STREET ADDRESS	525 S.W. 68TH AVE.		2.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP				
TITLE	VD	<input type="checkbox"/> DELETE	3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	FIGUEROA, JUAN A.		3.2 NAME				
STREET ADDRESS	300 SEVILLA AVE #309		3.3 STREET ADDRESS				
CITY-ST-ZIP	CORAL GABLES FL		3.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		<input type="checkbox"/> DELETE	5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			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	000002598190			
STREET ADDRESS			6.3 STREET ADDRESS	-07/24/98--01087--007			
CITY-ST-ZIP			6.4 CITY-ST-ZIP	***61.25			

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: *Juan A. Figueroa* DATE: 3/10/98
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: *Juan A. Figueroa*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: *Sandra B. Mortham* DATE: 3/10/98