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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1997 **DOCUMENT # 662278** (1)PETCLE PROPERTIES, INC. Principal Place of Business Mailing Address 735 NW 22ND AVENUE C/O GERALD N CAPPS MIAMI FL 33125-3339 FT LAUDERDALE FL 33334 US 3. Date Incorporated or Qualified 3a. Date of Last Report 04/30/1980 04/05/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-2115742 Not Applicable 26 Suite, Apt. #, etc. Suite, Apt. #. etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing П Added to Fees Trust Fund Contribution 23 28 Country Country 8. This corporation has liability for intangible tax under s. 199.032, Yes XNo Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent David M. Goldstein **GERALD W CAPPS** 548 E COMMERCIAL BLVD 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33334 100 S.E. 2nd Street, Suite 2750 83 64 Miami, 33131 Statutes, the above named corporation submits this statement for the purpose of changing its registered was authorized by the corporation's board of directors. I hereby accept the appointment as registered to the statutes. Pursuant to the provisions of Sections 607 0502 and 607 1508 office or registered agent for both, in the State of Tolida Sucragent Lam familiar way, and reput the obligations of Society. 11. Pursuant to the provisions agent Lam familiar w SIGNATURE (NOTE: Registered Agent signature required when reinstating) (96/6)ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. PSD DELETE Change Addition 1.1 TITLE lilit CAPPS, GERALD N. 1.2 NAME NAME David M. Goldstein 735 NW 22ND AVENUE 1.3 STREET ADDRESS 100 S.E. 2nd Street, Suite 3750 STREET ADDRESS MIAMI FL 1.4 CITY - ST - ZIP CHY-ST 7:P Miami, FL 33131 Change Addition DELETE 21 TITLE THE 2.2 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2, 4 CITY - ST - ZIP Off Y-ST-7-P DELETE Change Addition 3.1 TITLE THLE 3 2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CDY-ST-Zil: DELETE Change Addition PHF 4.1 Tille MALM 4. 2 NAME 4.3 STREET ADDRESS STREET AFFIRESS 4.4 CITY-ST-ZIP CHTY-ST ZIE DELETE Change Addition 5.1 TITLE THEF NAME 5.2 NAME STREET AT OFIESS **5.3 STREET ADDRESS** Cala-St Zin 5.4 CITY - ST-ZIP DELETE Change Addition 6.1 TITLE 1001 6.2 NAME

14. Lide 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 armual 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 efficier or a rector of the corporation or the receiver or trustee empoyered 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

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ACORESS C(1) - S1 - 7(2)

561-482-1016

FILED

Mar 10 1997 8:00am