

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 08:00 AM
Secretary of State

DOCUMENT # 663485

1. Entity Name
INVERNESS PROPERTIES CORP.



Principal Place of Business
2601 BISCAYNE BLVD.
MIAMI, FL 33137

Mailing Address
2601 BISCAYNE BLVD.
MIAMI, FL 33137



02232004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-1959279

Applied:
Not App.

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RODRIGUEZ, ANTONIO
2601 BISCAYNE BLVD.
MIAMI, FL 33137

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees 05/03/04-80108-013 150.00

U000000147491

10. OFFICERS AND DIRECTORS

TITLE DS
NAME GOLDSTEIN, MICHELLE
STREET ADDRESS 2601 BISCAYNE BLVD
CITY-ST-ZIP MIAMI, FL

TITLE D
NAME GERSTEN, SHERRI
STREET ADDRESS 2560 SUNSET DR
CITY-ST-ZIP MIAMI BCH, FL 00000,

TITLE DP
NAME MILLER, ROGER
STREET ADDRESS 2601 BISCAYNE BLVD.
CITY-ST-ZIP MIAMI, FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11, changed, or on an attachment with an address, with all other like empowered.

SIGNATURE _____