


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

FILED

Jan 15 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 697483 (6)			
1. Corporation Name ROSE GORDON REALTY, INC.			
Principal Place of Business 6400 SW 50TH ST. MIAMI FL 33155		Mailing Address 6400 SW 50TH ST. MIAMI FL 33155	
2. Principal Place of Business		2a. Mailing Address	
21		26	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
22		27	
City & State		City & State	
23		28	
Zip		Country	
24		29	
25		30	
9. Name and Address of Current Registered Agent			
CHEPENIK, STEPHEN 11800 SW 67TH COURT MIAMI FL 33156			
10. Name and Address of New Registered Agent			
81 Name			
82 Street Address (P.O. Box Number is Not Acceptable)			
83			
84 City			
85 Zip Code			
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			
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS			
TITLE	NAME		
NAME	STREET ADDRESS		
STREET ADDRESS	CITY - ST - ZIP		
CITY - ST - ZIP	DELETE		
TITLE	NAME		
NAME	STREET ADDRESS		
STREET ADDRESS	CITY - ST - ZIP		
CITY - ST - ZIP	DELETE		
TITLE	NAME		
NAME	STREET ADDRESS		
STREET ADDRESS	CITY - ST - ZIP		
CITY - ST - ZIP	DELETE		
TITLE	NAME		
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STREET ADDRESS	CITY - ST - ZIP		
CITY - ST - ZIP	DELETE		
TITLE	NAME		
NAME	STREET ADDRESS		
STREET ADDRESS	CITY - ST - ZIP		
CITY - ST - ZIP	DELETE		
TITLE	NAME		
NAME	STREET ADDRESS		
STREET ADDRESS	CITY - ST - ZIP		
CITY - ST - ZIP	DELETE		
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE			
1.2 NAME			
1.3 STREET ADDRESS			
1.4 CITY - ST - ZIP			
2.1 TITLE			
2.2 NAME			
2.3 STREET ADDRESS			
2.4 CITY - ST - ZIP			
3.1 TITLE			
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY - ST - ZIP			
4.1 TITLE			
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY - ST - ZIP			
5.1 TITLE			
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY - ST - ZIP			
6.1 TITLE			
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY - ST - ZIP			

14. 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 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: *Rose Gordon* Pres

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0217328

CR2E034 (10/97)