PROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 

G00549

(7)

SHOPPING	CENTER	INVESTMENTS.	INC.

Principal Place of Business Mailing Address	1001 W. CYPRESS CREEK ROAD SUITE 306G FT. LAUDERDALE FL 33309	1001 W. CYPRESS CREEK ROAD SUITE 306G
	Principal Place of Business	Mailing Address



FT. LAUDERO	DALE FL 33309	FT. LAUDERDALE FL 3		·V11L	. 000				
						3. Date incorporated or Qualified 09/20/1982	3a. Date	of Last F	'
2. Principal Pla	ace of Business	2a. Mailing Address		<b></b>		4. FEI Number 59-2238792			Applied For Not Applicable
Suite, Apt. a	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required
City & State		City & State		*******	A1 JAA 14 - L1	Election Campaign Financing     Trust Fund Contribution		\$5.0	O May Be
Zip <b>24</b>	Country 25	Zip 29	Count	ry		This corporation has liability for Florida Statutes	intangible ta	<del></del>	
	<ol><li>Name and Address of Current</li></ol>	Registered Agent				10. Name and Address of New R	egistered a	Agent	
			8	1	Name				
POLITIS	. JOHN		8	2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
1001 W. CYPRESS CREEK ROAD SUITE 306G					Addition to the Additional Processing				
FT.LAUD	DERDALE FL 33309		8	3					
			8	4	City		FL	85 Z	p Code
11. Pursuant t or registen familiar wit	o the provisions of Sections 6(17.0502 ed agent, or both, in the State of Florid h, and accept the obligations of, Sectio	and 607.1508, Florida Statute a. Such change was authorize on 607.0505, Florida Statutes	es, the above ed by the co	- L. - nar rpora	med corpora ation's board	ation submits this statement for the pur d of directors. I hereby accept the appo		nging its registered	registered office d agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent a					when renstating)	DATE		
12.	OFFICE RS AND		13.	PJI IL SI	rgnarcre required	ADDITIONS/CHANGES TO OFF		DIRECTO	DRS IN 12
TITLE	PD	DELETE	1 1 TITL	 F				1 Change	Addition
NAME	POLITIS, JOHN		1 2 NAM				•		
STREET ADDRESS	1001 W. CYPRESS CR. 306G		13 STRE	ET AD	DDRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		14 CITY	- ST - ;	ZIP				-
TITLE	S	<b>□X</b> DEFELE	2 1 TITL	E	S	ECRETARY	C	Change	Addition
NAME	RECALDE, SANDRA M		. 22 NAM	E	W	ATERS, JO			
STREET ADDRESS	1001 W. CYPRESS CR. 306G		23 STRE	ET AC	DDRESS 1	001 W. Cypress C	reek 1	Rd.	306G
CiTY-ST-ZiP	FT. LAUDERDALE FL		2.4 CITY		ZIP <b>F</b> '	t. Lauderdale, Fl	L_3331	) 9	
TITLE	VPD	☐ DELETE	3 1 TITL					] Change	☐ Addition
NAME	POLITIS, AMANDA		3 2 NAM						i
STREET ADDRESS	1001 W. CYPRESS CREEK RE	)., SIE. 306G	3 3. STRI						
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL EVPD	DELETE	3.4 CITY 4. 1 TITL		ZIP			7 Change	□ Addition
NAME	POLITIS, JAMES	Libert	4. 1 11:L				L.	T onguings	Addition
STREET ADORESS	1001 W. CYPRESS CREEK RE	a arneg	4.2 NAM		nneess				
CITY-ST-2IP	FT LAUDERDALE FL	/· πουσο	4.4 City		1				
TITLE	- I - WALLET L	☐ DELETE	5. 1 TITL		<u></u>		Г	7 Change	Addition
NAME			5.2 NAM						
STREET ADDRESS			5.3 STRE	ET AD	DDRESS				
CITY-ST-ZIP			5.4 DITY	-\$1-2	ZIP				
TITLE		☐ DELETE.	6 1 TH L	E				] Change	Addition
NAME			6.2 NAM	ξ					
STREET ADDRESS			6.3 STRE	FT AD	DDRESS				
	i								<b>I</b>

CITY-ST-ZIP

14. I do hereby certify that the information supplied with his filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information in pacted of this annual apparent 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 of director of the corporation or Vie receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if manged, or on an attribute of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

John Politis, President SIGNING OFFICER OR DIRECTOR