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

PROFIT CORPORATION ANNUAL REPORT

IUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## FILED May 06 1998 8:00am Secretary of State

	MENT # G661 S. PROPERTIES, INC.	13 (3)					
Principal Place	e of Business	Mailing Address			—   I IDDINIA OBIA CAND DANGI NIBOT KARRO NIII DIANA U	ILDIN BARAN TYDAY TAY	III OIOH IHOT
895 BRISBANE STREET N.E. 895 BRISBANE STREET PALM BAY FL 32907 PALM BAY FL 32907			ET N.F.				
					00 107 11075 1177	0.004.05	
					DO NOT WRITE IN THI  3. Date Incorporated or Qualified	S SPACE	
					10/24/1983		
2. Principal Pi	lace of Business	2a. Mailing Address			10/24/1903 4. FEI Number	T Ar	oplied For
1 26					59-2357630	<u> </u>	ot Applicable
	Suite, Apt. #, etc Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional
27					6. Certificate of Status Desired	Fee Re	equired
City & State	) 	City & State			Election Campaign Financing     Trust Fund Contribution	\$5.00 Added	
Ziρ	Country	Zip	Country	1	8. This corporation owes or has paid the o		
24	25	29	30		Personal Property Tax due June 30.		No
	9. Name and Address of Curre	ini Registered Agent	B1	Name	10. Name and Address of New Registers	d Agent	
	ANS, DONALD		61	1491116			
	5 BRISBANE ST. NE LM BAY FL 32907		82 83		ress (P.O. Box Number is Not Acceptable)		
			84			<del></del>	
				City	F	<b>85</b> Zip (	Code
SIGNATURE		gent and title if applicable. (f ND DIRECTORS	NOTE Registered Age	ent signature requ	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	IS IN 12_
TITLE	PSD	EVANS, DONALD				☐ Change	Addition
NAME							
STREET ADDRESS	895 BRISBANE ST. NE		1.3 STREET				
CITY-ST-ZIP	PALM BAY FL	☐ DELETE	1.4 CITY - S	ST- ZIP		Change	Addition
TITLE NAME		☐ MILERE	2 1 TITLE 22 NAME	1		L_1 Citality	Apailion
STREET ADDRESS			2.3 STREET	Annoces	_		
CITY-ST-ZIP	ł .		2.4 CITY-	l.			
TITLE	DELETE		3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	☐ Change	Addition
NAME			32 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4. CiTY-	ST-ZIP			
TITLE	<b>₩</b>	☐ DELETE	4.1 TITLE 4.2 NAME			☐ Change	Addition
NAME		1					
STREET ADDRESS			4 3 STREET	1			
CITY - ST - ZIP		DELETE	4.4 CiTY-S 5.1 TITLE	ST-ZIP	777	Change	Addition
NAME	L) DELEGIE		5.2 NAME			THE OWNERS	- rigoniul
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S				
TITLE		DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET	ADDRESS			
CITY-ST-ZIP			6.4 CITY - S	T- ZIP			

4. Thereby 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

Lemin

× 3/30/98

407-7257370

CRZE034 (10/97)