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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

G99444

(3)

1. Corporation	ROPERTIES, INC.	(3))	BIBII BABII 1881
Principal Place of Business Mailing Address								
1719 NW 92ND WAY 1719 NW 92ND WAY								
	PRINGS FL 33071	CORAL SPRINGS FL 33071			·			
1						NOT WRITE IN TH	IIS SPACE	
					3. Date Incorporated of	r Qualified		
2, Principal F	Place of Business 2a. Mailing Address			· · · · · · · · · · · · · · · · · · ·	03/05/1984 4. FEI Number		T I A	pplied For
21	45 Angenetius, sec. 26				59-2406711			ot Applicable
Suite, Any ** *** Suite Apt. #, etc.						Desired		Additional
22	BOCA RATON, PL 80407	67 L			5. Certificate of Status	Desired L.J	Fee R	beriupe
	10 SES N. Federal Pary	— 1			6. Election Campaign		•	May Be
23 70	Soca Paton, PL Country	Zip Country			Trust Fund Contribution Added to Fees			
Zip 37487 Country 24 USA		29 30		· ·	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. No			
27	g. Name and Address of Curr		30]		10. Name and Address			
	KOCH, ALLAN J.		81	Name				
	1719 N.W. 92ND WAY		82	Street A	ddress (P.O. Box Number is N	of Acceptable)		
	CORAL SPRINGS FL 33071				Carbo (F.C. Dox Hamber is In	or recognitions		
			83					
İ			84	City			85 Zip	Code
				L		F	▝┗▃▕▏▕	
office or agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Sta am familiar with, and accept the obli	gations of, Section 607.0505, Flo	rida Statute	S.				registered registered
	Signature, typed or printed name of registered a			ent signature re	equired when reinstating)	DAT		20.151.40
12.	PD OFFICERS A	ND DIRECTORS DELETE	13. 1.1 TITLE		ADDITIONS/CHANGE	S TO OFFICERS A	Change	Addition
NAME	KOCH, ALLAN J.		1.2 NAME				C ountile	
STREET ADDRESS	1719 NW 92ND WAY		1.3 STREET ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS FL	1.4 City-st						
TITLE	VSD	DELETE	2.1 1ITLE				Change	Addition
NAME	KOCH, JERRIE SUE		2.2 NAME					
STREET ADDRESS	1719 NW 92ND WAY		2.3 STREET ADDRESS					
CITY-ST-ZIP			2. 4 CITY-	ST-ZIP				
TITLE	-	☐ DELETE	3.1 TITLE				☐ Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3 3 STREET	ľ				
CITY-ST-ZIP		DELETE	3.4. C/TY - ST - Z/P				Change	Addition
TITLE NAME		L. DELETE	4.1 TITLE 4.2 NAME				∟ Change	☐ Addition
STREET ADORESS			4.2 NAME					
CITY-ST-ZIP								
TITLE		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE				Change	Addition
NAME			5.2 NAME	}			•	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY - S					
TITLE		☐ DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME	1				
CTOCCT ADDDCCC	Ī		£ 2 C7DCLT	ADDDECC				

14. I 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 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 pranges or or in attachment with an address.

SIGNATURE:

CITY-ST-ZIP

1/12/98

954/752-3549

FILED

Jan 20 1998 8:00am

Secretary of State

E034 (10/97)