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

PROFIT CORPORATION ANNUAL REPORT

THE REPORT OF THE PARTY OF THE

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS **FILED**

Apr 24 1997 8:00am

Secretary of State

1997 **DOCUMENT # H97971**

(6)

1. Corporation Name IML PROPERTIES INVESTMENT CORPORATION Principal Place of Business Mailing Address 1401 BRICKELL AVENUE 1401 BRICKELL AVENUE SUITE 630 MIAMI FL 33131 MIAMI FL 33131-3503									
							3. Date Incorporated or Qualified 02/06/1986	3a. Date of Last R 03/26/1996	eport
2. Principal P	lace of Busine	SS	2a. Mailing Add	dross			4. FEI Numbor	Ar	plied For
21			26	Suite, Apt. #, etc.			59-2681846		t Applicable
Suite, Apt.	#, etc.		Surfe, Apt.	r—ı ' ' '			5. Certificate of Status Desired	☐ \$8.75 A	
City & State	е		<u></u> ⊢-1 ′	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip 24	Country 25		Zφ	7(р Сол		·	8. This corporation has liability for intangible tax under s. 199.032,		
24]		29 29 Agent Agent		30		Florida Statutes Yes No 10, Name and Address of New Registered Agent			
Name and Address of Current Registered Agent LEVENSHON, IRA						Name	10. Name and Address of New A	Share on Agent	
1401 BRICKELL AVENUE					-	Charact Asial	70 0 D. M. J. M. A.	L1_1	
SUITE 630					82	Sirect Add:	ress (P.O. Box Number is Not Acceptal	olej	1
MIAMI FL 33131									
					84	City		85 Zip	Code
						- ',			
office or n agent. I a SIGNATURE							poration submits this statement for the tion's board of directors. I hereby acce		s registered registered
10	Signature, lypod o		AND DIRECTORS	(NOTE	: Rog stored Ago	ent signature requi	red which reinstating) ADDITIONS/CHANGES TO OFFI	DATE	PS INI 12
12.	DPT	OFFICENS		DELETE	11 1171.		ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	LEVENSHON, IRA M.			1.2 h				— •	
STREET ADDRESS 1401 BRICKELL AVENUE, SUI			UITE 630						}
1	CITY-ST-ZIP MIAMI FL					IT-ZIP			}
TITLE				DELETE	21 THTLE			Change	Addition
NAME					2.2 NAME				
STREET ADDRESS					2.3 STREET	ADDRESS			Ì
CITY-ST-ZIP					2 4 CITY-	S1-ZIP			
TITLE	TITLE			DELETE				☐ Change	☐ Adøition
NAME					3.2 NAME				
STREET ADDRESS					3.3 \$1REE1	ì			
CITY-ST-ZIP	 -			DELETE	3.4. CITY-	ST - ZIP		Change	Addition
TITLE			[_]	DELL IL	4.1 11feE 4 2 NAME			□ Outuinge	L. Addition
NAME Street address					4.3 STREET	Annesce			
CITY-ST-ZIP	ł				4.4 C(1) - S	ì			}
TITLE				DELFTE	5.1 Till#	21-71		Change	Addition
NAME					5.2 NAMI	1			
STREET ADDRESS					5.3 STREET	ADDRESS			
CITY-ST-ZIP					5.4 City-S	- 1			}
TITLE				DELETE	6.1 TITLE			Change	L Addition
NAME					6.2 NAME]

14. I do 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 eath, 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.

6.3 STREET ADDRESS 6.4 CHY-ST-ZIP