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

FILED

Jan 29 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE

ANNU	RPORATION PROPERTY IN THE PROP			Sandra E Secreta DIVISION OF	ry of Sta	te		Secretary of State	-	
DOCUI 1. Corporation KEY \		# J7060 THE DESERT, INC		(3)				E HRRINIR BILLI KARIK BRINIR RITILI ABILLI KARI RIBILI ABAKK AKANI RIBILI RIKKI BIRI	1 1111	
Principal Plac C/O ACA J 617 DUVAL KEY WEST	IOE . Street	1500 AT SUITE 3 KEY WE	Mailing Address 1500 ATLANTIC SUITE 313 KEY WEST FL 33040 US			•	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
2. Principal P	lace of Busin		2a. Mailing Address				04/29/1987 4. FEI Number Applied F 59-2804277 Not Appli	 -		
Suite, Apt.	#, etc.	Suite, A	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Addition Fee Required			
City & State	9	City & 6	City & State				6. Election Campaign Financing \$5.00 May 8 Trust Fund Contribution Added to Fees			
Zip 24	Zip Country			Zip Cou 29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\sum \) No		
	g. Name	and Address of Curren		gent				10. Name and Address of New Registered Agent		
	CUTNER, M					81	Name		.]	
	17 DUVAL					Street A	ddress (P.O. Box Number is Not Acceptable)	ess (P.O. Box Number is Not Acceptable)		
K	EY WEST	FL 33040					·			
						83				
[City	EL 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									}	
10	Signature, typed	or printed name of registered age OFFICERS AND		le. (NOT	E: Register		nt signature re	adulted when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1:		
12.	S	Of FIGER OF AN	J BINEOTONO	DELETE		TTLE	T		ddition	
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NAME CERTET ADDRESS					- 1	AME TREET	ADDRESS		Ì	
STREET ADDRESS CITY-ST-ZIP						OTY-S	Į.		ľ	
14. I hereby o	certify that th	e information supplied w	ith this filing doe	es not qualify f	or the ex	emp	tion stated	in Section 119.07(3)(i), Florida Statutes. I further certify that the inform	ation	