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

FILED							
May 04 1998 8:00am	ì						
Secretary of State							

DOCU 1. Corporatio	MENT # K30865	(5)			
BIRD 7	4 SHOPPING CENTER, INC.			a di	
Principal Plac	e of Business	Mailing Address		1 100(01)) COD (())(0310) 10((0 0)(0) 03() 010)	. Aidis Bibis dibis gibis sebi
7378-7396 BIR MIAMI FL 331		6915 RED RD #215-A			
US	~~	MIAMI FL 33143		DO NOT WRITE IN THIS	SPACE
		US		3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Mailing Address		08/12/1988 4. FEI Number	Applied For
21		26		65-0070615	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 City & Stat	6	City & State		Election Campaign Financing	Fee Required \$5.00 May Be
23	-	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25 9. Name and Address of Current	29	30	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
*		veditraten võetti	81 Name	10. Name and Address of New Registered	Agent
	1A, SAMIR M. 5 RED ROAD, SUITE 215-A		82 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	RAL GABLES FL 33143		DZ Street At	udiess (F.O. Box Nomber is Not Acceptable)	
			63		
			84 City	FL	85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508 Florida Stati	ites the above-named c		
office or i	egistered agent, or both, in the State o	of Florida. Such change was	authorized by the corpo	orporation submits this statement for the purpose or pration's board of directors. I hereby accept the ap-	pointment as registered
SIGNATURE	and account the configuration of the configuration	10113 01, 0000011 001 .0003, 1	Torrida Statutog.		
	Signature, typed or printed name of registered agent		TE Registered Agent signature re	equired when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTORS IN 10
12.	OFFICERS AND	DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
HAME	TAHA, SAMIR M.		1.2 NAME		
STREET ADDRESS	6915 RED ROAD, STE. 215A		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	D DC CTC	1.4 CITY - ST - ZIP		D Observe D Addition
TITLE NAME		☐ DELETE	2.1 TITLE 2.2 NAME		Change Addition
STREET ADDRESS			2.3 STREET ADDRESS		1
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS 3.4. CHTY+ST-ZIP		ļ
CITY-ST-ZIP TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		i
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME		T DETER	5.1 TITLE 5.2 NAME		C Change C Abdition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

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 changed, or on an attachment with an address