FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

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1. Corporation Name DOUGLAS SOUTH APARTMENTS, INC.

USA

9. Name and Address of Current Registered Agent

Principal Place of Business	Mailing Address		
VILMA BENITEZ 900 DOUGLAS RD CORAL GABLES FL 33134 US	2858 NW 79TH AVENUE 1627 BRICKELL AVE APT. 1101 MIAMI FL 33122 US		
2. Principal Place of Business 11 900 Doyalas Rd	2a. Mailing Address 26 1027 BRICKEL AUC		

e	65-0137351		Not Applicable
	5. Certificate of Status Desired		\$8.75 Additional Fee Required
	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
s A	This corporation has liability for Florida Statutes Yes	∍ □No	
	10. Name and Address of New I	Registere	d Agent
Nanie Be Street Ad	MITEZ, VICHA dress (P.O. Box Number is Not Acceptat BRICKEU ME	ble)	
100	1 00,0100000		

3. Date Incorporated or Qualified

04/21/1989

3a. Date of Last Report 04/18/1995

BENITEZ, VILMA 2858 NW 79TH AVENUE APT. 1101 MIAMI FL 33122	63 84	Street Address (P.O. Box Number is 1627 BRICKEU. 1101 City MIRM	FL 85 Zip Code 33129	
 Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, or registered agent, or both, in the State of Florida. Such change was authorized familiar with, and accept the obligations of Section 607.0505, Florida Statutes. 	the above r by the corpo	lamed corporation submits this staten oration's board of directors if hereby a	ent for the purpose of changing its registered officept the appointment as registered agent. I am	се

Country

SIGNATURE _	Vikur Ben	ten	Fagotorical April 18 har at the displaced action described by the State Control of the State			
12.	mi se barrel or presentante et repringer and de OFFICERS AND DIFTE	CLORS	13.	ADDITIONS/CHANGE	S TO OFFICERS AND DIRECTO	
TITLE	D	⊠ DELETE	1 1 T.TLF	D	⊠ Change	Add tion
NAME	BENITEZ, VILMA		1.2 NAME	BENITEZ, VILMA 1607 BRICKELL MIAMI, PL 33	اطلتاك منجة	
STREET ADDRESS	2858 NW 79TH AVENUE		1.3 STREET ADDRESS	1607 BRICKELL	NUE # 1101	
CITY-ST-ZIP	MIAM! FL		1.4 CiTY - S1 - ZiP	MIAMI, PL 33	129	
TITLE		DELETE	2 1 TITLE		Change	Addition
NAME			2.2 NAME	1		
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CHY-ST-ZIP			3.4 CITY - ST - ZIP			
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STREET ADDRESS			4.3 STREET ADDRESS			
- '			4.4 CITY - ST - ZIP			
CITY - S1 - ZIP		DELETE	5 i Tille		☐ Change	☐ Addition
NAME		Car	5.2 NAME			
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STREET ADDRESS			5.4 CITY - \$1 - 7IP			
CITY-ST-ZIP		DELETE.	6 1 TULE		Change	Addition
T-TLE		<u></u>	6.2 NAME			
NAME			6.3 STREET ADDRESS			
STREET ADORESS			6.4 CITY - ST - ZIP			
CITY-ST-ZIP			■ 04 CI 7 · 3 · ZIP	initial for the aveguation stated in S	action 110 07/3Vk) Florida Statu	ites I further

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify 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.

Better Signing Ficer on Director