## 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 #

(1)

HOLLAND PROPERTY MANAGEMENT, INC.

## **FILED** May 12 1998 8:00am Secretary of State



Principal Plac	ce of Business	Mailing Address			1.4 0.0.1 0/011 £101, 6131, 6131, 1541
4880 NE 12TH AVE FT LAUDERDALE FL 33334		4860 NE 12TH AVE FT LAUDERDALE FL 33334			
				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 05/31/1989	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0128026	Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		g. Continuate of States Besting	Fee Required
City & State		City & State		6. Election Campaign Financing	_ <b>\$5.00</b> May Be
Zip	Country	28	Country	Trust Fund Contribution	
	25	Zip	h	8. This corporation owes or has paid t	
24	9. Name and Address of Currer	pt Registered Agent	30	Personal Property Tax due June 30  10. Name and Address of New Regis	
HC.	XLAND, GERALD M.	it Hogisterou Agent	81 Name	IU. Hame and Address of New Negis	tered Agent
	60 N.E. 12TH AVE.		Than to		
FT, LAUDERDALE FL 33334			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
F1.	. LAUDENDALE FL 33334		83		· · · · · · · · · · · · · · · · · · ·
			89		
			84 City		85 Zip Code
44 Bus	7- N (-14 D 000 0/6	0 1007 HOD EL . 1 0 .			FL 10 2 P COOK
Office of	registered agent, or both, in the State am familiar with, and accept the oblig	of Florida, Such change was	s authorized by the corpor	orporation submits this statement for the purp ation's board of directors. I hereby accept the	no appointment as registered
SIGNATURE	Signature, typod or printed name of registered ag-	ent and title it applicable (NC	DTF Registered Agent signature req	juired when reinstating)	DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	S AND DIRECTORS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME	HOLLAND, GERALD M		1.2 NAME		
STREET ADDRESS	4860 NE 12TH AVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY-ST-ZIP		
TITLÉ	DVST	DELETE	2.1 TITLE		Change Addition
NAME	HAHNER, RICHARD A		2.2 NAME		
STREET ADDRESS	4860 NE 12TH AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City-St-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME	,		62 NAME		·
STREET ADDRESS			6 3 STREET ADDRESS		
CITY - ST - ZIP			6 4 CITY-ST-ZIP		
	certify that the information supplied w	ath this filing does not qualify		n Section 119 07/3\/i) Florida Statutes I furt	her certify that the information

I nereby certify that the information supplied with this filling 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 supplimental 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.

GNATURE:

4/6/98

954-771-1210