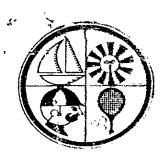
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| SECOND NO | TICE: CORPORATION WILL BE D TE ON OR BEFORE 094 193 \$550 (IE DISS | ISSOLVED ON OR AFTER S OLVED, MUMMUM AMOUNT DUE T | | 1998.). | | (1) | |
|---|--|---|---------------------------------------|--|---|---|--|
| * COF | PROFIT RPORATION JAL REPOR | DRI DEPART S. dra B | of State | | Much of the state | .ED | |
| | 1998 DIVISION OF CORPORATIONS | | | 99 JAN -7 PM 2: 46 | | | |
| DOCUMENT # L03627 (1) | | | | SECRETARY OF STATE TALLAHASSEE. FLORIDA | | | |
| JOCKEY | PROPERTIES, INC. | | | | | | |
| Principal Place of Business Mailing Address | | | | | | | |
| 11111 BISCAYNE BLVD APT. 7/5 MIAMI FL 33181-3404 C/O-36 MIAMI-BERVICE GORP. 11111 BISCAYNE BLVD APT. 7/5 MIAMI FL 33181-3404 | | | | - (| DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/21/1989 | | |
| Principal Place of Business 2a. Mailing Address | | | <u></u> | - | 4. FEI Number Applied For | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | Ant # etc | | 65-0135527 | Not Applicable \$8.75 Additional | |
| 22 27 | | | | 5. Certificate of Status Desired | Fee Required | | |
| City & State City & 28 | | City & State | / & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip 24 | Country 25 | 2ip 3 | Country | | This corporation owes or has pa Personal Property Tax due June | | |
| | 9. Name and Address of Current | | | | 10. Name and Address of New Ro | | |
| HERMAN, JACK | | | | | | | |
| 11111 BISCAYNE BLVD. NORTH MIAMI FL 33181-3404 | | | | (P.O. Box Number is Not Acceptab | ye) | | |
| | | | 83 | | | | |
| [| | | 84 City | | | FL 85 Zip Code | |
| 11. Pursuani office or | to the provisions of sections 607,0502 registered agent, or both, in the State of | and 607.1508, Florida Statutes, of Florida, Such change was aut | the above-named o | corporation's | on submits this statement for the pur s board of directors. I hereby accept | pose of changing its registered the appointment as registered | |
| agent. I | am familiar with, and accept the obligat | jons of, section 607.0505, Florid | ia Statutes. | | 1// | 17/98 | |
| 12. | Signature, typed or printer name of registered agents OFFICERS AND | and little if applicable (NOTE | Registered Agent signatu | re required | when reinstating) ADDITIONS/CHANGES TO OFF | DATE | |
| TITLE | D OF TOP TOP | DELETE | 1.1 BILE | Ţ <u> </u> | ADDITIONO/OTIANOCO TO OFF | Change Addition | |
| NAME | HERMAN, JACK H. 11111 BISCAYNE BLVD. | | 1.2 NAME | | | | |
| STREET ADDRESS CITY-ST-ZIP | NORTH MIAMI FL | | 1.3 STREET ADDRESS 1,4 CITY-ST-ZIP | | | , | |
| TITLE | D | DELETE | 2.1 TITLE | D | | Change Addition | |
| NAME STREET ADDRESS | the state of the s | | 2.2 NAME | टिइन्स् र | TO DAY | | |
| CITY-ST-ZIP | NORTH MIAMIFE | i | 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | - | MAH | | |
| TITLE _ | D CARDONIA LINI ARV | DELETE | 3.1 TOTLE | | | Change Addition | |
| STREET ADDRESS | SARDINIA, HILLARY A 11111 BISCAYNE BLVD. | | 3.2 NAME 3.3 STREET ADDRESS | نڪييد | | 2752120=-2 | |
| CITY ST-ZIP | NORTH MIAMI FL 33181-3404 | | 3.4 CITY-ST-ZIP | | | 2/9901106026 150.00 ****150.00 | |
| TITLE | • | DELETE | 4.1 TITLE | | | Change Addition | |
| STREET ADDRESS | | | 4.2 NAME 1 4.3 STREET ADDRESS | 1 | 000002 | 2/9901106027 | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | 50.00 ****150.00 | |
| TITLE | | DELETE | 5.1 TITLE | | | Change Addition | |
| NAME STREET ADDRESS | | ſ | 5.2 NAME 5.3 STREET ADDRESS | | | | |
| CTTY-ST-ZIP | | | 5.4 CITY-ST-ZIP | <u> </u> | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | Charge Addition | |
| NAME STREET ADDRESS | | | 6.2 NAME 6.3 STREET ADORESS | j | | | |
| CITY-ST-ZIP 6.4 | | | 6.4 CITY-ST-ZIP | <u> </u> | | | |
| 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 6(i7, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. | | | | | | | |

SIGNATURE REQUIRED IN Jace Herma

SIGNATURE:





Jockey Club Realty Co., Inc.

Lept 28, 1998

To Whom it may Concern:

In Re 1998 Profit Corp. annual
Report for Journa Properties Inc. Pocument
No. fo 3627 pleasebe advised that
we First Received our first notice
on Lept 24th 1998, however it was
marked 2 nd notice, I was advised
by one of your Reparentative Surpension
This morning to enclose a check for
#15000 along with this fetter. Please
ascept our apologiese for being Tate.

Joslieg Properties Inc. By m Jack Herman-Pres.