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 Apr 13 1998 8:00am Secretary of State

1. Corporatio	Name ROPERTIE		087	(7)				 - 	ij s iail exem <u>l</u> au.	JI O ljek 100)
- 1 1 1 E										
Principal Place of Business Mailing Address										
1221 BRICKELL AVE 2000 TOWERSIDE SUITE 1010										
	MIAMI FL 33131 MIAMI FL							DO NOT WRITE IN THIS SPACE		
US			US					3. Date Incorporated or Qualified		
								12/14/1989		
2. Principal P	lace of Busin	ess	} 	2a. Mailing Address				4. FEI Number Applied For		
Suite, Apt.	# etc		[26] Suite	Suite, Apt. #, etc.				65-0199378		ot Applicable Additional
22	#, 0 (0.		7	27				5. Certificate of Status Desired		equired
	City & State City & S							6. Election Campaign Financing	\$5.00	May Be
23		28					Trust Fund Contribution		to Fees	
Zip		Country	Zip			Country		8. This corporation owes or has paid the current year Intangible		
24		25 Address of	29					Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
g, Name and Address of Current Registered Agent							Vame	10. Name and Address of New Registered	- Agent	
GRUBER, HERBERT S.						81 Name				
	O TOWRSII		8:	2 8	Street Addre	ss (P.O. Box Number is Not Acceptable)				
SUITE 1004					8	83				
MIAMI FL 33138										
						4 0	City	FI	85 Zip	Code
office or r agent. I a SIGNATURE			07.0502 and 607.15 c State of Florida. State of Florida. State of					ration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing if	ts registered registered
12.	OFFICERS AND DIRECTORS				13.			ADDITIONS/CHANGES TO OFFICERS AN		
TITLE	OP GOLDMEIR, BARRY				1.1 TOTLE				☐ Change	L.J Addition
NAME		1.2 NAME 1.3 STREET ADDRESS								
STREET ADDRESS	MIAMI F	ickell ave, si	JIIE 1010	1.3 \$ 1.4 0						
CITY-ST-ZIP TITLE	MIMMIT	<u> </u>		DELETE 217			IP		Change	☐ Addition
NAME	j					2.2 NAME			Lan Onlings	
STREET ADDRESS	····-			235		-	DRESS			
CITY-ST-ZIP				2.40						
TITLE				DELETE 3.1 TI		3.1 TITLE			Change	☐ Addition
NAME					3.2 NAME	E				
STREET ADDRESS					3.3 STREI	et adi	DRESS			į
CITY-ST-ZIP			 	T berete	3.4. CITY		ZIP		60	A didness.
TITLE				☐ DELETE	4.1 TITLE				L Change	Addition
NAME STREET LOODEGE					4. 2 NAM	_	nnree			
STREET ADDRESS					4.3 STREE		4			
CITY-ST-ZIP TITLE				DELETE	4.4 CITY- 5.1 TITLE		<u>''</u>		Change	☐ Addition
NAME					5.2 NAME		}			
STREET ADDRESS					5.3 STAE		DRESS			ļ
CITY-ST-ZIP					5.4 CITY-		1			
TITLE				DELETE	6.1 TITLE				Change	Addition
NAME					6.2 NAME	Ε				
STREET ADDRESS					6.3 STREE	ET ADI	DRESS			
CITY-ST-ZIP	L				6.4 CITY-	ST-Z	IP _			

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 attach provides.

GNATURE:

SIGNATURE: