FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

M10914

(3)

MONTROSE REALTY CORP. OF FLORIDA, INC.

FILED Mar 09 1998 8:00am Secretary of State

			I (AAIAA) KARI KARI KARI ABAN BANDA KARIK ARAK ABAN ANAN ANAN ANAN ANAN ANAN ARAK ARAK	
Principal Place of Business	Mailing Address			
SCO-GYPRESS CREEK RD: WEST FORT-LAUDERDALE FL 53300	C/O ROSE ASSOC 200 MADISON AVI NEW YORK NY 10	E. 5TH FLOOR	DO NOT WRITE IN THIS SPACE	
			3. Date Incorporated or Qualified 02/04/1985	
2. Principal Place of Business	2a. Mailing Addres	\$	4. FEI Number Applied For	
21 3700 AIRPORT A	OAD 26		13-3255527 Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, et	c.	SR 75 Additional	
	03 27		6. Certificate of Status Desired Fee Required	
City & State BOLA RATON 1	City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution	
Zip Count	í han '	Country	8. This corporation owes or has paid the current year Intangible	
	USA [29]	30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
MASTRIANA, F. RONAL	or the second of the self-results.	81 N	Name and Address of New Registered Agent	
2750 N. FEDERAL HIGH				
FORT LAUDERDALE FL		82 S	Street Address (P.O. Box Number is Not Acceptable)	
7 3111 2 1322 12	. 00000	83		
		84 C	City B5 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes, and accept the appointment as registered agent. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.				
SIGNATURE				
Signature, typied or pointed race	e of regadered open) and title if applicable		signature required when reinstating) DATE.	
	DEFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
HAME ROSE, DANIEL	L DELE		L. Change L. Addition	
STREEL ADDRESS C/O 200 MADISON AVENUE - 5TH FLOOR		1.2 NAME		
CITY-ST-ZIP NEW YORK NY	A AVENUE - SIII I EOON	1.3 STREET ADD		
TITLE D	DELE	14 CITY-ST-ZII 16 21 TITLE	Change Addition	
NAME ROSE, ELIHU		2.2 NAME		
STREET ADDRESS C/O 200 MADISON AVENUE - 5TH FLOOR			2 3 STREET ADDRESS	
CITY-S1-ZIP NEW YORK NY		2. 4 CITY-ST-Z	ZIP	
TITLE D	DELE		Change Addition	
NAME ROSE, FREDERIC		3.2 NAME		
STREET ADDRESS C/O MADISON AVENUE - 5TH FLOOR		3.3 \$1REET ADD	DRESS	
CHY-ST-ZIP NEW YORK NY		3.4. C(TY-\$T-Z(
TITLE		TE 4.1 TITLE	Change Addition	
NAME		4. 2 NAME		
STREET ADDRESS		4 3 STREET ADD	I	
CITY-ST-ZIP	DELE:	4.4 CITY - ST - ZII		
NAME	L beer		Change Addition	
STREET ADDRESS		5.2 NAME	DDFCC	
CITY-ST-ZIP		5.3 STREET ADD	1	
TITLE	DELET	5.4 CITY-S1-ZII 6 1 TITLE	Change Addition	
NAME		62 NAME	La cronge La Papriori	
STREET ADORESS		63 STREET ADD	DAESS	
CITY-ST-ZIP		64 CHY-ST-ZIF		

4. 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 is supplemental injuring Leport 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 received on bysice 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 altagraph with an employer.

CIGNATURE.

(212) 210-6666