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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M34262

(9)

13TH ST. PROPERTIES, INC.

FILED
Apr 30 1997 8:00am
Secretary of State

Principal Place of Business 9/0 MARK MYERS POINT SCHEEK TOI SE 6TH AVE DELRAY BCH FL 33483		Mailing Address 9/0 MARK MYERS ONUN SCHLLEN 701 SE 6TH AVE DELRAY BCH FL 33483-5112			3. Date Incorporated or Qualified 38. Date of Last Report 05/01/1996			
_	l Place of Business	2a. Mailing Address	,		4. FEI Number 59-2698857		Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	<u>├</u>		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & St 23	tato	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip	Country	Zip	Coul	ntry	8. This corporation has liability for in			
24	25	29	30		· -	Yes 🔲 No		
	9. Name and Address of Currer	t Registered Agent			10. Name and Address of New Reg	Istered Agent		
— 70 — ĐĐ	Yers, Mark-)1-se 6th ave Elray Bch fl 89444			82 Street Address 83 City	ess (P.O. Box Number is Not Acceptable)	FI 85	Zip Code 3.3483	
office o agent./ SIGNATURE	Sunstrue Typed of printed national configuration age. OFFICERS AN	int and title if applicable (NO D DIRECTORS	authorized lorida Stati It: Registered	by the corporation by the corporation of the corpor	oration submits this statement for the prior's board of directors. I hereby accepted when renstating) ADDITIONS/CHANGES TO OFFICE	11/8/97 DATE	· · · · · · · · · · · · · · · · · · ·	
TITLE	DP	☐ DELETE	1.1 10	LE		Cha	nge Addition	
NAME	FLORESCUE, RENATE		1.2 NA	ME				
STREET ADDRES			1.3 ST	REET ADDRESS				
CITY-ST-ZIP	DELRAY BOH FL			Y-ST-ZIP				
TITLE	-VI	DELETE	2.1 1/1			L_ Cha	nge 🔲 Addition	
NAME	MYERS, MARK	•	2.2 NA					
STREET ADDRESS	-DELRAY BCH. FL-			REFT ADDRESS				
CITY-ST-ZIP TITLE	VT	DELETE	31 111	TY-ST-7IP		Cha	nge Addition	
NAME		En Decert	3.2 NA	- 1		£., 010	.a	
STREET ADDRESS	SCHEER, DANA 101 SELTH AUC			REET ADDRESS				
CITY-ST-ZIP	DEIRAY BOH FL			TY-ST-ZIP				
TITLE	The state of the s	DELETE	4.1 TiT			Cha	nge 🔲 Additio	
NAME			4. 2 N/	AME				
STREET ADDRESS	ss		4.3 ST	REE1 ADDRESS				
CITY-ST-ZIP			4.4 CIT	IY-ST-ZIP				
TITLE		DELETE	5.1 10	LE		Cha	nge 🔲 Addition	
NAME			5.2 NA	ME				
STREET ADDRESS	is		5381	REET AODRESS				
CITY-ST-ZIP			5.4 CIT	IY-ST-ZIP				
TITLE		☐ DELETE	6.1 117	LF		Cha	nge Addition	
NAME			6.2 NA	MΕ				
STREET ADDRESS	ss		6.3 \$1	REET ADDRESS				
City-St-ZiP			64.00	IY-ST-ZIP				

I do hereby certify that the information sumplied 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 our Lam 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.

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