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. Corporation Name

(6)

FIRST PRIMA INDUSTRIAL PROPERTY CORP.

FILED Mar 25 1998 8:00am Secretary of State

|--|--|--|--|--|--|--|

Principal Place	of Business		Mailing Address						THE RESERVE) 	
4702 SW 74TH AVENUE 4702 SW 74TH AVENUE 1500 SAN REMO 1500 SAN REMO MIAMI FL 33155 US US							DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/27/1987				
2. Principal Pla	ace of Busine	SS .	2a. Mailing Addre	9SS			4. FEI Number		TIA	pplied For	
21			26				59-2789428			ot Applicable	
Suite, Apt. #	, etc.		Suite, Apt. #,	etc.			5. Certificate of Status Desired		\$8.75	Additional	
22 27							b. Certificate of Status Desired	<u></u>	Fee R	equired	
City & State City & State							6. Election Campaign Financing	_		May Be	
23		Couples	28]		unto	,	Trust Fund Contribution	<u> </u>		to Fees	
					8. This corporation owes or has paid the current year intangible						
24		-	nt Registered Agent	[30]	Personal Property Tax due June 30. Yes No 10, Name and Address of New Registered Agent						
en,	ARE, LESLIE				81	Name	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
					<u></u>						
1500 SAN REMO CORAL GABLES FL 33146					82	Street Addre	iss (P.O. Box Number is Not Acceptable	ss (P.O. Box Number is Not Acceptable)			
	WIL WIDEL	016 00110			83						
					ļ				00 7:-	0-4	
					84	City		FL	85 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. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.											
SIGNATURE			· ·····-								
12.	Signature typed or	printed name of registered as OFFICERS At	Prit and title if applicable ND DIRECTORS	(NO1E: Registers	od Age	ent signature require	d when re-instating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND F	IRECTO	PS IN 12	
TITLE		OF TOLENS AL	DEI DEI		fTLF	T	ADDITIONS/CHANGES TO OTT TO		Change	Addition	
NAME	_	, ALBERTO	_		IAME				_ •	_	
STREET ADDRESS	ATOM FOUNDS BALL BLOO				ADDRESS						
CITY-ST-ZIP	MIAMI FL					ST-ZIP					
TITLE			☐ DEI				•		Change	Addition	
NAME				2.2 N	IAME						
STREET ADDRESS				2.3 \$	TREET	ADDRESS					
CITY-ST-ZIP				2.44	CITY-!	ST-ZIP					
TITLE	,, , , , , , , , , , , , , , , , , , ,		DEL	.ETE 3.1 T	ITLE		***************************************		Change	Addition	
NAME				3.2 N	IAME						
STREET ADDRESS				3.3 9	TREET	ADDRESS					
CITY-ST-ZIP				3.4. (CITY :	ST-ZIP					
TITLE			☐ DEI	.ETE 4.1 T	ITLE			L] Change	Addition	
NAME				4.21	NAME						
STREET ADDRESS				4.3 S	TREET	ADDRESS					
CITY - ST - ZIP					iTY - S	ST-ZIP			T-2:		
TITLE			☐ DEI			ĺ		L	Change	Addition	
NAME					AME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP						ST-ZIP		r	1 Channel	Addition	
TITLE			∐ DEI					L] Change	Addition	
NAME				6.2 N							
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP	ortify that the	information cumplind	with this filing doos not			ST-ZIP	Section 119 07(3)(i) Florida Statutes Lf	urther certi	fy that the	ninformation	

I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. Further certify that the information indicated on this 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.

SIGNATURE:

365-366-6603