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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # N9600003562 (3)

DOM-SOUTH RESIDENCE CORPORATION

FILED May 20 1997 8:00am Secretary of State

Principal Place of Evaluations Suffice 202 Suffice 2	DGA-SC	OUTH RESIDENCE CORPC	PRATION 		·							
SUITE 202 MIAMI FL 33139 S. Dete incorporated or Qualified DY/C5/1986 S. Date of Lest Report DY/C5/1986 S. Date of Lest Report DY/C5/1986 Suite, Apt #, etc Suite, Apt By Suite Suite, Apt By Suite, Apt #, etc Suite, Apt By	Principal Place	of Business	Mailing Ado	dress				1	n tom refet, men imira mitat annes amb	ii Mairi Marii	SEING IIIS AILE A	11116 1100 1881
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Sulte, Apt #, etc 22 City & State 23 City & State 25 City & State 26 City & State 27 Country 27 28 Country 28 Country 29 Country 29 29 Country 20 S. Name and Address of Current Registered Agent S. Name and Address of Current Registered Agent WASHING'ON, LYNN C 701 BRICKELL AVE. SUITE 3000 MAMI FL 33131 11. Pursuant to the provisions of Sociolos 617.0502 and 617.1508. Fiorida Statutas, the above-named corporation submits this statement for the purpose of changing fire registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing fire registered agent, and accept the obligatory of Sociolos 617.0502 and 617.1508. Fiorida Statutas, the above-named corporation submits this statement for the purpose of changing fire registered agent, and accept the obligatory of Sociolos 617.0503. Fiorida Statutas, the above-named corporation submits this statement for the purpose of changing fire registered agent, and accept the obligatory of Sociolos 617.0503. Fiorida Statutas, the above-named corporation submits this statement for the purpose of changing fire registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing fire registered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing fire registered agent, or both, in the State of Florida Statutas. SIGNATURE D. OFFICERS AND DIRECTORS IN 12 D. DELETE D. ADDITIONS AMAYE D. DELETE 11 ITILE D. ADDITIONS AMAYE A THE D. ADDITIONS AMAYE D. DELETE 11 ITILE D. ADDITIONS AMAYE D. DELETE 11 ITILE D. ADDITIONS AMAYE A THE D. ADDITIONS AMAYE D. DELETE 11 ITILE D. ADDITIONS AMAYE A THE D. ADDITIONS AMAYE Change V.) Add A THE D. ADDITIONS AMAYE A THE D. ADDITIONS AMAYE A THE D. ADDITIONS AMAYE Change V.) Add A THE D. ADDITIONS AMAYE Change V.) Add A THE D. Change V.) Add A THE D. Change V.) Add		ace of Business	·	Address					4. FEI Number		-	
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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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

305-858-8325

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

4-16-97

Daytime Phone # 0026676