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PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

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ROUSE-MIAMI, INC.

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May 15 1998 8:00am	1
Secretary of State	

CII CD



Principal Place					{			
		Mailing Address						
SZYMANSKI, JOHN J. 10275 LITTLE PATUXENT PARKWAY COLUMBIA MD 21044		SZYMANSKI. JOHN. J. 10275 LITTLE PATUXENT PARKWAY COLUMBIA MD 21044		DO NOT WRITE	E IN THIS SPA	ACE		
		US			3. Date Incorporated or Qualified			
9 Principal Di-	ace of Business	2a. Mailing Address			06/12/1984 4. FE! Number		ΙΙΔε	oplied For
z. rnincipai rii 1	ace of business	26			52-1163652		- -	ot Applicable
Suite, Apt. #	#, etc.	Suite, Apt #, etc						Additional
2		27			5. Certificate of Status Desired		Fee Re	equired
City & State	·	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added	,
Zip	Country	Zip	Countr	У	8. This corporation owes or has pa	aid the currer	nt year Int	angible
•	25	29	30		Personal Property Tax due June] No
	9. Name and Address of Current	Registered Agent		т .	10. Name and Address of New Re	egistered Ag	ent	
CT	CORPORATION SYSTEM		8	Name				
120	0 S. PINE ISLAND ROAD		82	2 Street Add	Iress (P.O. Box Number is Not Acceptal	ble)		
PLA	UNTATION FL 33324		L.	<u> </u>		·		
			83	3				
			84	4 City			85 Zip (Code
			1	'	poration submits this statement for the p	FL	· '	
agent. I ar	m familiar with and accept the obliga	itions of, Section 607.0505, Fi	orida Statute	es.				
		(NC)	IE Donislava fu	acel pionali ne requi	involutions rejectables)	DATE		
	Signature, typed or printed name of regulered agen			gent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND D	IRECTOR	RS IN 12
12.	OFFICERS AND		13.		ired when reinstating) ADDITIONS/CHANGES TO OFFICE		IRECTOR	
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I hereby certify that the information supplied with this bling does not qualify for the exemption stated in Section 119.07(3)(). Florida Statutes. I further certify that the information indicated on this annual report or suppliements 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 in an attachment with an address

GNATURE:

JOHN J. SZYMANSKI, VP

SCHATURE AND THE OR PRINT D NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

H24/95