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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P92000000827 (5)**

PHAGAN PROPERTY MANAGEMENT. INC.

Principal Place of Business Mailing Address 8129 S.W. 82ND COURT 8129 S.W. 82ND COURT MIAMI FL 33143-6614 MIAMI FL 33143 3a. Date of Last Report 3. Date Incorporated or Qualified 02/08/1996 10/29/1992 4. FEI Number 2a. Mailing Address 2. Principa! Place of Business Applied For 65-0373981 26 21 Not Applicable Suite, Apt. #, etc. Suite, Ant. #. etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zio Country 8. This corporation has liability for intangible tax under s. 199.032, Yes Mo 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 PHAGAN, JANICE 8129 S.W. 82ND COURT 82 Street Address (P.O. Box Number is Not Acceptable) MIAM! FL 33143 83 City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typicator printed name of registered agent and title if applicable. 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) Change Addition DELETE THE 1.1 TITLE PHAGAN, JANICE NAME 1.2 NAME 8129 S.W. 82ND CT. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CHIV-SU-7₽ 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE Title 22 NAME NAME STREEL ADDRESS 2.3 STREET ADDRESS CITY ST-7IP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TO LE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CRY-ST ZE DELETE Change Addition 4.1 TITLE Hit 4 2 NAME NAME

6.4 CITY-ST-ZIP 14. I do 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

4.3 STREET ADDRESS 4.4 CITY - ST-ZIP

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

5.1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY ST-ZIP

CITY - S1 - 7IP

TITLE

1010 NAM

> DOURSELOUINED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

4/1/17 Dayt me Phone #

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Apr 07 1997 8:00am

Secretary of State

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Change

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Addition

Addition