PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90012 032 ***150.00

DOCUMENT # P92000013497

1. Corporation Name

CODEGA	A REALTY, INC.									
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Principal Place	e of Business	Mailing	Address							• • • • • • • • • • • • • • • • • • • •
9300 N.W. 58TH	i St.		W. 58TH ST.							
STE 201		STE 201	1 FL 33178				DO NOT W	RITE IN THIS	SPACE	
MIAMI FL 33178 US	5	WIAMI F	L 33170			-	3. Date Incorporated or Qualife		0, 7,02	
1			•				12/22/1992			
2 Principal P	lace of Business	2a. Ma	illing Address				4. FEI Number		I A	pplied For
<u> </u>	N.W. 58 Street	<u>⊢≕</u>	-	Stree	o t		65-0388410		• +	lot Applicable
Suite, Apt.			ite, Apt. #, etc.	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					\$8.75	Additional
22 Suite		27 St	uite 209				5. Certificate of Status Desired		Fee R	tequired
City & State			y & State				6. Election Campaign Financin	<u> </u>	\$5.00	May Be
23 Miami	, Florida	28 Mi	iami, Flori	lda			Trust Fund Contribution		Added	to Fees
Zip	Country	Zip		Country	/		8. This corporation owes the co	ırrent year inta		
24 33178	3 USA	29 33	3178	30 USA	A		Personal Property Tax.		Yes	□ No
	9. Name and Address of Curren	nt Registere	d Agent				10. Name and Address of Nev	Registered	Agent	
	T4144014 FNDIOLIE			81	Name		•			
1	TAMARIA, ENRIQUE			82	Street	Address	s (P.O. Box Number is Not Acce	ptable)		
1	N.W. 58TH ST.			<u> </u>		_	·			
j MIAN	MI FL 33178			83	1				•	
				84	City				85 Zip	Code
					"			FL		
		20 4 607 4	EOO Elorido Statuta	e the above		COLDOLS	ition submits this statement for the	ne purpose of	changing it	s registered
11. Pursuant	to the provisions of Sections 607.050	of Florida S	buch change was all	ithorizad hu	the como	oration's	board of directors. I hereby acc	ent the appoir	ntment as r	eaistered
office or n	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obliga	∟of Florida. S	Such change was au	itnorized by	the corpo	oration's	s board of directors. I hereby acc	cept the appoir	ntment as r	egistered
office or n agent. I a	registered agent, or both, in the State.	∟of Florida. S	Such change was au ction 607.0505, Flori	ithorized by ida Statutes	the corpo	oration s	s board of directors. I nereby acc	ept the appoi	ntment as r	egistered
office or n	registered agent, or both, in the State im familiar with, and accept the obliga Signature, typed or printed name of registered agei	of Florida. S ations of, Sec	Such change was au ction 607.0505, Flori	ithorized by ida Statutes Registered Age	the corpo	oration s	s board of directors. I nereby acc	DATE	iumeni as i	
office or nagent. I a SIGNATURE	registered agent, or both, in the State im familiar with, and accept the obligation of the obligation	of Florida. S ations of, Sec	Such change was au ction 607.0505, Flori licable. (NOTE:	Registered Age	the corpo	oration s	s board of directors. I nereby acc	DATE	D DIRECT	ORS IN 12
office or nagent. I a SIGNATURE 12. TITLE	registered agent, or both, in the State im familiar with, and accept the obligation of signature, typed or printed name of registered age of FFICERS AN	of Florida. S ations of, Sec	Such change was au ction 607.0505, Flori	Registered Age 13. 1.1 TITLE	the corpo	oration s	s board of directors. I nereby acc	DATE	iumeni as i	ORS IN 12
office or nagent. I a SIGNATURE 12. TITLE NAME	registered agent, or both, in the State im familiar with, and accept the obligation of the obligation	of Florida. S ations of, Sec	Such change was au ction 607.0505, Flori licable. (NOTE:	Registered Age 13. 1.1 TITLE 1.2 NAME	r the corpo	oration s	s board of directors. I nereby acc	DATE	D DIRECT	ORS IN 12
office or nagent. I a SIGNATURE 12. TITLE	registered agent, or both, in the State im familiar with, and accept the obligation of the obligation	of Florida. S ations of, Sec	Such change was au ction 607.0505, Flori licable. (NOTE:	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE	of the corpo	oration s	s board of directors. I nereby acc	DATE	D DIRECT	ORS IN 12
office or ragent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	registered agent, or both, in the State im familiar with, and accept the obligation of the obligation	of Florida. S ations of, Sec	Such change was au ction 607.0505, Flori licable. (NOTE: DRS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	of the corpo	oration s	s board of directors. I nereby acc	DATE	D DIRECT	ORS IN 12
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14. I 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 an arrestance of the corporation of the corpor

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP