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 # P93000026109 (7)

ADI PROPERTIES, INC.

Principal Place of Business 1111 KANE CONCOURSE, SUITE 400 Mailing Address

C/O SAKOWITZ & SAKOWITZ

FILED May 18 1998 8:00am Secretary of State



BAY HARBOR ISLANDS FL 33154		1111 KANE CONCOURSE, SUITE 401 BAY HARBOR ISLANDS FL 33154				DO NOT WRITE IN THIS SPACE			
		<i>5.</i> 11 151115611 (62.1156	, , , ,			3. Date Incorporated or Qualified 04/06/1993			
2. Principal Place of Business 2a. Mailing A			ldress			4. FEI Number	[Ap	plied For	
21		26				65-0438200	No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired Fee Required			
City & State	3	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28				Trust Fund Contribution	Added t		
Zip	Country	Zip	Co.	Country		8. This corporation owes or has paid the curr	ent year Int	angible	
24	25	29	30			Personal Property Tax due June 30.	Yes [] No	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
SAKOWITZ, ALAN				81	81 Name				
1111 KANE CONCOURSE, SUITE 401				00	Chront Andri	trace (B.C. Flav Number is Not Assessable)			
BAY HARBOR ISLANDS FL 33154					82 Street Address (P.O. Box Number is Not Acceptable)				
DA.	THATEON TODATED TE COIST			83					
				84	City	FL	85 Zip (Code	
44 Deposit to the manifered of Sections 507,0500 and 607,1600. Elevide Statutes, the above named correction 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 Signature, typed or printed ourse of registered agent and tide if applicable (NOTE: Registered Agent and tide if applicable).					nt signature requ	rired when reinstating) DATE			
12.	OFFICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFICERS AND			
TITLE	D	☐ DELETE	1.1 11	TLE	ļ		Change	Addition	
NAME	GREENBOIM, ABRAHAM		1.2 N	1.2 NAMÉ					
STREET ADDRESS	1111 KANE CONCOURSE,	SUITE 400	1.3 STREET ADDRESS		ADDRESS				
CITY - ST - ZIP	BAY HARBOR ISLANDS FL	L 33154 1.4 CITY-		ITY-SI	T-ZIP				
TITLE		DELETE	2.1 TITLE				Change	Addition	
NAME			2.2 N	2.2 NAME					
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP			2. 4 CITY-ST-ZIP		F				
TITLE		DELETE	3 1 II				Change	Addition	
NAME			l	3.2 NAME			=		
STREET ADDRESS			3 3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP			3.4. DITY-ST-ZIP		f				
TITLE	DELETE			4.1 TITLE			Change	Addition	
NAME				4.2 NAME					
					ADDRESS				
STREET ADDRESS				4.3 STREET ADDRESS					
CITY-ST-ZIP	DELETE DELETE			4.4 CITY - ST - ZIP 5.1 TITLE			Change	Addition	
TITLE				5.3 NAME			change	L_ Addition	
NAME									
STREET ADDRESS	SS			5.3 STREET ADDRESS					
CITY - ST - ZIP	DELETE			5 4 CITY - S1 - ZIP			Change	Addition	
TITLE	DELETE			6.1 TITLE			☐ Change	Addition	
NAME			6.2 M	AME					
STREET ADDRESS			6.3 S	TREET.	ADDRESS				
CITY-ST-ZIP				6.4 CITY - ST - ZIP					
14. I hereby o	ertify that the information supplied	with this filing does not qualify	for the ex-	empt	tion stated in	Section 119.07(3)(i), Florida Statutes. I further ce	rtify that the	information	

indicated on this annual report or supplied will also ming over two quality for the eventual resolution in section. In 1907(3)(if, include statutes, indicates in 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 optan attachment with an address.

SIGNATURE