## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## P93000030230 (5)

D & G PROPERTIES, INC.

ncipal Place of Business Mailing Address
200 S.W. 172ND AVENUE 16200 S.W. 172ND AVE AMI FL 33187 MIAMI FL 33187

## **FILED** Apr 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address				T JANUSANE LIN CRIAN NICHT ANNIC MULIST MAINT A	E102 hini 00419 hi000 hilli 0011 f801		
	16200 S.W. 172ND AVENUE 16200 S.W. 172ND AVENUE						
MIAMI FL 33187 MIAMI FL 33187					DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					04/20/1993		
<b>—</b>	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21 Suite Ant	# 17.	26			65-0433606	Not Applicable	
Suite, Apt.	₩, <b>e</b> tG.	Suite, Apt. #, etc			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Stat	10	City & State	<del></del>		6. Election Campaign Financing	\$5.00 May Be	
28		28			' ' '	Added to Fees	
Ζφ	Country	Zip	Countr	у	8. This corporation owes or has paid	the current year Intangible	
24	25	29	30	Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Address of New Regis	tered Agent	
	RLSON, DAVID L		["	INAMIE			
145 CURTISS PARKWAY			82	Street Add	Address (P.O. Box Number is Not Acceptable)		
MIAMI SPRINGS FL 33166			83				
				6.			
			84	City		FL 85 Zip Code	
11. Pursuant office or r agent. I a	to the provisions of Sections 607.05 egistered agent, or both in the State of familiar with and accept the obli	02 and 607/1508, Florida Statu io of Florida, Such Mango was gation at, Society 607.0605, F	utes, the abov authorized b Joyda Statute	re-named corpora s.	rgoration submits this statement for the purpation's board of directors. I hereby accept the	pose of changing its registered the appointment as registered	
SIGNATURE	Med Stalley	prov - 1	/we	Nesia	UCUC ( ired when reinstating)	7-19-98	
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER	IS AND DIRECTORS IN 12	
TIŦĿE	PD	DELETE	1.1 TITLE	[		Change Addition	
NAME	GROH, RICHARD		1.2 NAME				
STREET ADDRESS	16200 S.W. 172ND AVE.		1.3 STREE	T ADDRESS			
CHTY - ST - ZIP	MIAMI FL 33187	T 501.00	1.4 CITY -	ST-ZIP			
TOLE	VS CDOM ANA M	☐ DELETE	2 1 TITLE			Change Addition	
NAME DIRECT ADDRESS	GROH, ANA M 16200 SW 172 AVE.		2 2 NAME				
STREET ADDRESS CITY-ST-ZIP	MIAMI FL			T ADDRESS			
TITLE	Taram I C	DELFTE	2 4 CITY- 3 1 TIFLE	21- ZIF		Change Addition	
NAME		-	3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-ZIP			
TITLE		☐ DELETE	4.1 HILE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			1	ADDRESS			
CITY - ST - ZIP TITLE	·	DELETE	4.4 CHY-1	ST-ZIP		Change Addition	
NAME		L MILL	5.2 NAME			Li change Li Audition	
STREET ADDRESS			5.2 NAME 5.3 STREET	LADORESS			
CITY-ST-ZIP			5 4 CITY - 5				
TITLE		☐ DELETE	6 1 TITLE	<u> </u>		Change Addition	
NAME			6 2 NAME				
STREET ADDRESS			63 STREET	r ADDRESS			
CITY - S1 - ZIP			6.4 CITY-5	ST - ZIP			
14. Lhereby c	certify that the information exempled	with this filmer doos not applifu			Section 119 07/3\(\text{ii}\) Florida Statutes I furt	than partify that the information	

Thereby certily that the information supplies with this thing closes not quality for the exemption stated in Section 119.07(3)(), Florida Statutes. Thirther certily that the informatic indicated on this annual report or supplies with this public port 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 conforation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in