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Jan 16 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS



DOCUMENT # P93000032625 (4)

1. Corporation Name

GMN AFFORDABLE HOUSING PARTNER IX, INC.

Principal Place of Business

1460 BRICKELL AVENUE
SUITE 309
MIAMI FL 33131

Mailing Address

1460 BRICKELL AVENUE
SUITE 309
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1993

4. FEI Number

65-0476565

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

10. Name and Address of New Registered Agent

GREATER MIAMI NEIGHBORHOODS, INC.
1460 BRICKELL AVE.
SUITE 309
MIAMI FL 33131

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VD
NAME SIBLEY, RUSSELL A
STREET ADDRESS 1460 BRICKELL AVENUE, SUITE 309
CITY-ST-ZIP MIAMI FL 33131

1.1 TITLE Treasurer
1.2 NAME Gonzalo De Ramon
1.3 STREET ADDRESS 1460 Brickell Ave. #309
1.4 CITY-ST-ZIP Miami, FL 33131

TITLE D
NAME WOLFSON, LOUIS III
STREET ADDRESS 8940 N.E. 24TH TERRACE
CITY-ST-ZIP MIAMI FL 33172

2.1 TITLE Comptroller
2.2 NAME Mario A. Sario
2.3 STREET ADDRESS 1460 Brickell Ave. #309
2.4 CITY-ST-ZIP Miami, FL 33131

TITLE D
NAME ANDERSON, EUGENIA
STREET ADDRESS 1460 BRICKELL AVE., #309
CITY-ST-ZIP MIAMI FL 33131

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE PD
NAME DOMINGUEZ, AGUSTIN
STREET ADDRESS 1460 BRICKELL AVE 309
CITY-ST-ZIP MIAMI FL 33131

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARIO A SARIO
1/5/98

(305) 374-5502

Date

Daytime Phone # 0192228

CR2E034 (10/97)