FILE NOW: FILING FEE AFTER MAY 1.1S \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000046817 (1)
1. Corporation Name

PETRINA APARTMENTS, INC.

				3. Date Incorporated or Qualified 06/28/1993	3a. Date of Last Report 04/19/1994		
2. Principal Plac	on of Purinose	2a. Mailing Address			A ECI Number	_,1	Applied For
2, Philipar Plai	ce di Busines	x 26 5/2 5- 7	Vinea.	id. 10	65-0435458		Not Applicable
Suite, Apt. #	, etc.	2a. Mailing Address 7 76 5/2 S-7 Suite, Apt. #, etc. 27 Orngous City & State	B.	I Flo	5. Certificate of Status Desired		\$8.75 Additional Fee Required
22 City & State, 23 330		City & State 28 33062	/HOS	n /	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Count	у	8. This corporation has liability fo	r intangible ta	x under s. 199.032.
24	25	29	30			s 🔲 No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New	Registered a	Agent
			8	Name <	The Against		
RACINE	SUZETTE		8	2 Street Add	ress (A.C. Box Number is Not Accepte	able) ,	
	W 22RD AVE			5/3	2 US. Riverside	Dr	<u> </u>
1 5081 L	AUDERDALE FL 33312		8	3	. 12 1	FL	. 33062
, , , , ,	1000.10.10.10		8	Jon	your Beach.	1 12	85 Zip Code
			ļ ⁻	1 ' '	•	FL	
SIGNATURE _	o the provisions of Sections 607.050? ed agent, or both, in the State of Floric h, and accept the Unigations of Sections Signative, by a for policy page 1 registered agency.	Toeine		gest segmature re Live	nd where restating	DATE	
12.		DIRECTORS	13.		ADDITIONS/CHANGES TO O	FICERS AND	DIRECTORS IN 12
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NAME	racine, suzette		1.2 NAM	· 3	JUZE TE RACI	DE E	ለ •
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CITY-ST-ZIP	PORT LAUDERDALE FL 3331			-ST-ZIP	ompano BEACH	- / <u>~ ~</u>	Change [] Adding
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CITY-ST-ZIP TIFLE NAME		☐ DELFT€	33 STF 34 CIT 4 1 TV 4 2 NAM	REET ADOPESS 7 - ST - ZIP LE			Change Addition
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64 CITY-ST-ZIF

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplieriental 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 12 or Block 13 or on an attachment with an address.

5.3 STREET ADORESS

5 4 CITY - ST - ZIP

6.111111

6.2 NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

05/13/96

700001869277 -06/20/96--01033--0₁ Change ***225.00

08 6/19/96

R2E034 (12/95)