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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

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Secretary of State

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Grand Santaella 1-13-97 (305)229-6400

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000065733 (6)

VISTA DEL LAGO APARTMENTS, INC.

Principal Place		Mailing Addre				(130(13))	IM 13140 11111 WEITT BEHT	1 88 150 6 15 8 1 811	II 1989 J 1111	18 3111 1001
C/O MORRIS WATSKY 700 N.W. 107 AVENUE			C/O MORRIS WATSKY 700 N.W. 107 AVENUE							
MIAMI FL 3317		MIAMI FL 3317								
THE PARTY	•					3. Date Incor 09/17/19	porated or Qualified	3a. Date 05/01	of Last R /1996	eport
2. Principal Place of Business		2a, Mailing Add	2a, Mailing Address			,	4. FEI Number			plied For
21		26				65-044	65-0446019			t Applicable
Suite, Apt.	#, etc.	Suite, Apt.	#, etc.			5. Certificate	of Status Desired		\$ 8.75 Fee Re	Additional equired
City & State		City & State	City & State			6. Election C	6. Election Campaign Financing \$5.00 N			May Be
3		28				Trust Fund	Contribution		Added	to Fees
Zip	Country	Zip	}	Country	f	'	ration has liability for in	<i>_</i>		199.032
4	25] 9. Name and Address of Curr	29 29 Agent		30		Florida Sta	i Address of New Fee	Yes		
WAT	TSKY, MORRIS J	ent ricgistered Agent		B1	Name	IV. Name and	Address of New Mes	gistorou Agi		
	N.W. 107 AVE.									
	MI FL 33172			82	Street A	Address (P.O. Box Nu	mber is Not Acceptab	le)		
MIN	MI FL 931/2			83						
					L					
				84	City			FL	85 Zip (Code
11. Pursuant i	to the provisions of Sections 607.0	502 and 607 1508. Flo	rida Statuto	e the above	o-namod	cornoration submits ti	his statement for the n		anding it	e ragistara
office or r	egistered agent, or both, in the Sta m familiar with, and accept the obl	ate of Florida. Such cha	ande was a	uthorized by	v the corp	poration's board of dire	ectors. I hereby accep	t the appoin	tment as	registered
Ollice of the	m ramiliar with land accept the obl	ligations of Section 60	17.0505, 110	rida Statute:	S.					
agent. I a	THE CONTROL WITH CITY COURT OF STA	_								
agent. I a SIGNATURE		agent and the flanninable	(NOIII	Registered Apr	ent signature	required when reinstation)	,	DATE		
agent. I a	Signature typed or printed name of registered a	agest and the stappingable	(40H	Registered Apr	ent siguature	required when reinstating)	/CHANGES TO OFFIC	DATE ERS AND D	IRECTOR	S IN 12
agent. I al SIGNATURE 12.	Signature typed or printed name of registered a	ND DIBECTORS	(NOTE		ent signaturo		/CHANGES TO OFFIC	ERS AND D	RECTOR Change	
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