

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**CORPORATION
ANNUAL REPORT
1995**



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

APPROVE
FILE

55 MAR 21 1995
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000083730 (0)

1. Corporation Name
533 S.W. 179TH AVENUE, INC.

Principal Place of Business Mailing Address
**% JAYMONT MANAGEMENT INC
2 S BISCAYNE BLVD 1 BISCAYNE TOWER #1470
MIAMI FL 33131** **% JAYMONT MANAGEMENT INC
2 S BISCAYNE BLVD 1 BISCAYNE TOWER #1470
MIAMI FL 33131**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report
12/07/1993 **04/13/1994**

4. FEI Number Applied For
65-0460517 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 has liability for intangible tax under S. 199.032,
Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address

21 26

Suite, Apt. #, etc. Suite, Apt. #, etc.

22 27

City & State City & State

23 28

Zip Country Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

*** KRISS, RONALD A ESQ
VALDES-FAULJ COBB BISCHOFF & KRISS PA
2 S BISCAYNE BLVD 3400 1 BISCAYNE TOWER
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name
C T Corporation System

82 Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

83

84 City 85 Zip Code
Plantation FL 33324

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 *Tanya M. Villar* **TANYA M. VILLAR
SPECIAL ASSISTANT SECRETARY** **3-20-95**

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	JAMEEL, MAGDI
STREET ADDRESS	% JAYMONT MANGEMENT 1 BISCAYNE TWR #1470
CITY- ST- ZIP	MIAMI FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

**000001437070
-03/22/95--01107--004
****200.00 ****200.00**

3/20/95 MIST

Change Addition

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under provisions 199.032(1)(b), 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 120, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *MAGDI JAMEEL* **MAGDI JAMEEL** **March 1, 1995 305-374-5678**