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

PROFIT CORPORATION ANNUAL-REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400008824 (2)

**NELSON PROPERTIES, INC.** 

Principal Place of Business	Mailing Address
1733 E. COMMERCIAL BOULEVARD	1733 E. COMMERCIAL BOULEVARD
FORT LAUDERDALE FL 33334	FORT LAUDERDALE FL 33334-5787

## FILED May 12 1997 8:00am Secretary of State



FORT LAUDERDALE FL 33334			FORT LAUDERDALE FL 33334-5787							
							3. Date Incorporated or Qualified 02/03/1994	3a. Date of La		
<del></del>			2a. Mailing Address				4. FEI Number	1 33,43,	Applied For	
21		26	†				65-0465979		Not Applicable	
Suite, Apt. #, etc.		27	<u> </u>				5. Certificate of Status Desired See Required Fee Required			
City & Stat	ө	}ı	& State				6. Election Campaign Financing	\$5.	00 Мау Вв	
23	0	28		<del>-</del> -			Trust Fund Contribution	☐ Add	led to Fees	
Zip 24	Country Zip			Country		8. This corporation has liability for intangible tax under s. 199,032,				
24	9. Name and Address of Curr	29 ant Registerer	i Agent	30			Florida Statutes   10. Name and Address of New Ro	Yes No		
AII.	ENEZ, NELSON	on nogistoro	- Agoin		B1	Name	TO. Wante and Address Of New Hi	gistere@ Agent		
418	3 PINE ISLAND RD.									
	NRISE FL 33351			Ĺ	B2	Street Ad	dress (P.O. Box Number is Not Accepta	ole)		
				1	B3					
				Ī	B4	City		FL 85	Zip Code	
11. Pursuent office or r	to the provisions of Sections 607.0 registered agent, or both, in the Sta	502 and 607.15 ite of Florida. Si	08, Florida Statut uch change was a stion 607 0505, Flo	tes, the about authorized orida Statu	LL OVE by	named co	orporation submits this statement for the ation's board of directors. I hereby acce	ourpose of changing the appointment	ng its registered t as registered	
SIGNATURE	÷ <sup>1</sup>			onda Okna	rico	••				
	Signature, typed or printed name of registered	~			Age	nt signature rec	uired when reinstating)	DATE		
12.	OFFICERS A	ND DIRECTOR		13,			ADDITIONS/CHANGES TO OFFICE			
TITLE	INCHEZ MELCOM		DELETE	1,1 TITL				Char	ge [] Addition	
NAME	JIMENEZ, NELSON	I EVAND		1.2 NAN	AE.					
STREET ADDRESS	1733 E. COMMERCIAL BOU FORT LAUDERDALE FL 333			1.3 STR	EET.	ADDRESS				
CITY-ST-ZIP	FORT EAUDERDALE PL 333	34	Deret	1.4 CITY		T-ZIP				
TITLE			☐ DELETE	2.1 1111				∐ Char	ge L Addition	
				2.2 NAN						
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP TITLE			DELETE	2. 4 CIT		17 - ZIP		-		
NAME			□ bittit	31TITE				L Char	ge Addition	
STREET ADDRESS				3.2 NAM						
						ADDRESS				
CITY-ST-ZIP TITLE			DELETE	3.4, CIT		1-ZIP		Char	and The Address	
NAME			☐ Otten					L Char	ge Addition	
STREET ADDRESS				4. 2 NAM		1000000				
CITY-ST-ZIP						ADDRESS				
TITLE			DELETE	4.4 CHTY 5.1 THTL		- 7IP		Chan	an Laddien	
NAME			better					L. Chan	ge L Addition	
STREET ADDRESS				5.2 NAM		10000165			į	
CITY-ST-ZIP						ADDRESS				
TITLE			DELETE	5.4 C(TY 6.1 T(T)		1-ZIP		Chan	no. Andriilo	
NAME			tal pettit					L.J Chan	ge 🔲 Addition	
STREET ADDRESS				6.2 NAM		4000000				
						ADDRESS				
C(TY-ST-ZIP			···	6.4 CITY	- \$1	-ZIP				

I do 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 offect as if made under oath; that I am an officer or director of the occeptation set 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 chylogid, of on an attachment with an address.