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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000016136 (1)

CTA PROPERTIES, INC.

FILED Apr 20 1998 8:00am Secretary of State

GIA PROFE	INTIES, INC.								
Principal Place of Br	usiness	Mailing Addres	Mailing Address			T ENDINDAL OF IBIN DEDIE AND IT DAIN AND I	Arbs (1810 £110) (19	BA INNIA ANN NAGO	
433 PLAZA REAL SUITE 335 BOCA RATON FL 33432		SUITE 335	433 PLAZA REAL SUITE 335 BOCA RATON FL 33432		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
						03/01/1994			
2. Principal Place o	f Business	2a. Mailing Add	2a. Mailing Address			4. FEI Number		Applied For	
21		26				65:0471159	. [Not Applicable	
Suite, Apt. #, etc. 22		Suite, Apt. #	Suite, Apt. #, etc.				75 Additional e Required		
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Žip 24	Country 25	Zıp 29	30	Country 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes X No			
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
GRAGG, K. LAWRENCE WHITE & CASE 200 S. BISCAYNE BLVD., SUITE 4900 MIAMI FL 33131				81	Name				
				82	Street Address (P.O. Box Number is Not Acceptable)				
				83					
				84	City		FL 85	Zip Code	
office or realste	provisions of Sections 607. red agent, or both, in the St iliar with, and accept the ob-	tate of Florida. Such cha	nge was author	orized by	the carpor	orporation submits this statement for the purp ration's board of directors. I hereby accept the	oose of changi he appointmen	ng its registered it as registered	
SIGNATURE									
Signatur 12.	re, typed or printed name of registered	AND DIRECTORS	(NOTE. Reg	istored Age	nt signature rec	1	DATE	TORS IN 12	
				11 TOLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			

CROCKER, THOMAS J 1.2 NAME 433 PLAZA REAL, SUITE 335 STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE ☐ Addition TITLE 2.1 TITLE NAME ONISKO, ROBERT E. 2.2 NAME 433 PLAZA REAL, STE 335 STREET ADDRESS 2.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 3.1 TITLE NAME ACKERMAN, RICHARD S. STREET ADDRESS 433 PLAZA REAL, STE 335 3.3 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL** 3.4. CITY-ST-ZIP DELETE Change ___ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 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 it made under oath; that I am an officer or director of the corporation or the receiver or trustee ampowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed at on an attachment with an address.

SIGNATURE:

Robert E Micha

1/260

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