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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000020775**

DIXIE APARTMENTS OF HOLLYWOOD, INC.

Principal Place of Business	Mailing Address			
1680 SW 53RD AVE PLANTATION FL 33317	1680 SW 53RD AVE PLANTATION FL 33317			
Principal Place of Business	2a. Mailing Address			
¬ ·	<u> </u>			
21	26			

FILED Mar 11, 1999 8:00 am Secretary of State

03-11-1999 90214 023 ***150.00



1680 SW 53RD AVE PLANTATION FL 33317		1680 SW 53RD AVE PLANTATION FL 33317				DO NOT WRITE IN THIS SPACE				
						3.	Date Incorporated or Qualifed 03/14/1994			
2. Principal Place	of Business	2a.	Mailing Address			4.	FEI Number		Applied For	
:1		26					65-0499905		Not Applicable	
Suite, Apt. #, e	tc.	27	Suite, Apt. #, etc.			5.	Certificate of Status Desired	•	75 Additional ee Required	
City & State		28	City & State			6.	Election Campaign Financing Trust Fund Contribution	•	.00 May Be ded to Fees	
Zip	Country 25	29	Zip 30	Country		8.	This corporation owes the current year Personal Property Tax.	Intangible Yes		
9. Name and Address of Current Registered Agent			· · · ·	10. Name and Address of New Registered Agent						
SUBHAS	SH R PURANIK			81	Name					
300 N.W. 70TH AVENUE SUITE 202 PLANTATION FL 33317		82 Street Address (P.O. Box Number is Not Acceptable)								
			83							
		84	City			-	Zip Code			
11. Pursuant to the office or regis	ne provisions of Sections 607, tered agent, or both, in the St	.0502 and 6 tate of Florid	07.1508, Florida Statutes, to da. Such change was autho	ne above	-named corp the corporati	oration on's bo	n submits this statement for the purpose pard of directors. I hereby accept the ap	of changii pointment	ng its registered as registered	

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

-5					
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature	e required when reinstating)	DATE	<u></u>
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO C	OFFICERS AND DIRECTOR	RS IN 12
TITLE	D DELE	TE 1.1 TITLE		☐ Change	☐ Addition
NAME	PURANIK, SUBHASH	1.2 NAME			:
STREET ADDRESS	1680 SW 53RD AVE	1.3 STREET ADDRESS	s	•	ļ
CITY-ST-ZIP	PLANTATION FL 33317	1,4 CITY-ST-ZIP			
TITLE	D DELE	TE 2.1 TITLE		☐ Change	☐ Addition
NAME	PURANIK, VASANTI	2.2 NAME			
STREET ADDRESS	1680 SW 53RD AVE	2.3 STREET ADDRESS	s		
CITY-ST-ZIP	PLANTATION FL	2. 4 CITY-ST-ZIP			
TITLE	☐ DELE	TE 3.1 TITLE		Change	☐ Addition
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS	s		
CITY-ST-ZIP		3.4. CITY-ST-ZIP			
TITLE	☐ DELE	4.1 TITLE		☐ Change	☐ Addition
NAME		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS	s		
CITY-ST-ZIP		4.4 CITY-ST-ZIP	•		
TITLE	☐ DELE			Change	Addition
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS	s		
CITY-ST-ZIP		5.4 CITY-ST-ZIP			
TITLE	DELE	6.1 TITLE		☐ Change	☐ Addition
NAME		6.2 NAME			
STREET ADDRESS		6.3 STREET ADDRESS	s		
CITY-ST-ZIP		6.4 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 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 13 if changed, or on an attachment with an address, with all other like empowered.