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 # P94000023295 (6)

CITONY LAND & INVESTMENT, INC.					
ļ					
Principal Place	e of Business	Mailing Address		T THEATERS THE THIS DID IT MODIST WHIS CAPITA D	NION TONDO ATOLD LUNGS. CRIMI MITTO CHAN
999 BRICKELL AVENUE. 7TH FLOOR 999 BRICKELL AVE		999 BRICKELL AVENUE.	7TH FLOOR		
MIAMI FL 33131		MIAMI FL 33131		DO NOT WRITE IN T	HIC CDACE
ļ				3. Date Incorporated or Qualified	NIS SPACE
				03/28/1994	
2. Principal Pl	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0474959	Not Applicable
Suite, Apt.	#, etc	Suite, Apl. #, etc.			\$8.75 Additional
27				5. Certificate of Status Desired	Fee Required
City & State City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z _i p	Country	Z _i p	Country	8. This corporation owes or has paid the	
24	25 9. Name and Address of Curre		30	Personal Property Tax due June 30. 10. Name and Address of New Registe	Yes No
		sur undigitation whalit	81 Name	(U. Haline and Address of Herr Negliste	IVA MIGNIK
BETZ, GILBERT C					
2025 SW 32ND AVE SUITE 120			82 Street A	Address (P.O. Box Number is Not Acceptable)	
	IAMI FL 33145		83		
[" "	IIAMI FE 33 143				
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.0!	502 and 607.1508, Florida Statute	s, the above-named o		
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Flonda, Such change was au idations of Section 607,0505, Flor	uthorized by the corporate	corporation submits this statement for the purpo- oration's board of directors. I hereby accept the	appointment as registered
SIGNATURE		9			
SIGNATOR:	Signature, typed or printed name of registered a	HOM) older drip grit outstone tragg	Angistared Agent signature of		
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	0	DELETE	1.1 TITLE		Change Addition
NAME	HABER, GARY		1.2 NAME		
STREET ADDRESS	16815 NW 74TH AVE		1.3 STREET ADDRESS	sted 5.W. stack Ten	الاهدف
CITY-ST-ZIP TITLE	MIAMI FL 33015	DELETE	1.4 City-St-ZiP 2.1 Title	MIAMI, FL 33145	Change Addition
		L. Dettit	2.3 NAME		Li change Li Addition
NAME CYDER ACCOUNCE					1
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	2 4 CITY - ST - ZIP 3 1 TITLE		☐ Change ☐ Addition
NAME		- Sec. 11	32 NAME		Manual Stranger Band (1001/00)
STREET ADDRESS			33 STREET ADDRESS		
CITY-S1-ZIP			3 4 CITY-ST-ZIP		Ì
TITLE		DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELFIE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 CITY - ST - ZIP		ļ

14. Thereby certify that the information supplied with this filling 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 supplied initial annual Apport 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 fustee 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 pagain attachingly with an address.

SIGNATURE:

FBB. 4 ,1998

305-350 Add

FILED

Feb 10 1998 8:00am

Secretary of State