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

**PROFIT CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

## Apr 15 1998 8:00am Secretary of State

**FILED** 

	MEN   # P940( ROPERTIES, INC.	00023869 (8)				<b>18. 14.14. 14.14. 14.14. 14.14. 14.14</b>
Principal Place of Business Mailing Address					- I INDOLOGIA HAD ADAM BOUNT BOOM DOLLY DOLLY BOULD 159	RE HIM LONG DILLE IBIL 1901
7130 SW 44TH STREET MIAMI FL 33155 US		7130 SW 44TH STREET MIAMI FL 33155 US		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified	
2. Principal P	lace of Business	2a. Maiting Address			03/29/1994 4. FEI Number	Applied For
21	2:	26			65-0485204	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	е	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the cu	
24	25 9. Name and Address of Cur		30		Personal Property Tax due June 30.  10. Name and Address of New Registered	Yes No
		IGUE LABUSTATAN ABOUT		81 Name	10. Hallie and Address of New Negletoled	Agent
BELA FORRAY						
9371 SW 69TH STREET MIAMI FL 33173				82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
nik	4M 1 E 03 170			83		
				84 City		85 Zip Code
				City	FL	- 2ip Code
office or r agent. I a SIGNATURE	egistered agent, or both, in the St in familiar with, and accept the ob- Signature typed or printed name of registered	ate of Florida. Such change was a digations of, Section 607.0505, Flo	uthorize rida Stat	d by the corpor utes.	orporation submits this statement for the purpose of ration's board of directors. I hereby accept the appropriate the purpose of the purpose	pointment as registered
12.	OFFICERS /	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	D	☐ DELETE	1.1 T			Change Addition
NAME	FORRAY, BELA		1.2 N			
STREET ADORESS	7130 SW 44TH STREET MIAMI FL			REET ADDRESS	•	
CITY-ST-ZIP TITLE	D MIAMI PL	DELETE	2.1 T	TY-ST-ZIP		☐ Change ☐ Addition
NAME	FORRAY, MARIA A		2.2 N/			
STREET ADDRESS	7130 S.W. 44 STREET		4	REET ADDRESS		
CITY-ST-ZIP	MIAM) FL			ITY-ST-ZIP	,	
TITLE		DELETE	3.1 1		V	Change Addition
NAME			32 N/	ME )		
STREET ADDRESS			3.3 ST	REET ADDRESS		
CITY-ST-ZIP		——————————————————————————————————————	_	TY-ST-ZIP		T 66
TITLE		☐ DELETE	4.1 10			Change Addition
NAME	li		4, 2 N	l l		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELETE	4.4 CI 5.1 T/	TY-ST-ZIP		Change Addition
NAME		- Dettit	5.1 M	ī		
INCARE.			3.2 N/	MAIL		

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 rue 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 enfowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with a flag dress.

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

Change

Addition