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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000033066 (9) **DOCUMENT** #

MANOR LANE INVESTMENTS CORPORATION

Principal Place of Business Mailing Address 1600 NW 159TH STREET 1600 NW 159TH STREET MIAMI FL 33169 MIAM! FL 33169 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/02/1994 2. Principal Place of Business Mailing Address 4. FEI Number Applied For 65-0489616 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country 2ip Country 7_{in} 8. This corporation owes or has paid the current year Intangible 24 Yes 25 129 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **BLANCO-REYES, MARILYN** ONE SOUTHEAST THIRD AVENUE Street Address (P.O. Box Number is Not Acceptable) STE. 2400 83 **MIAMI FL 33131** RA City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed harne of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE TITLE 11 TITLE Change Addition **ASARNOW, CHARLES** NAME 1.2 NAME STREET ADDRESS **1600 NW 159TH STREET** 1.3 STREET ADDRESS MIAMI FL 33169 CITY-ST-ZIP 1.4 CITY-ST-ZIP Change DELETE TITLE 2.1 TITLE Addition GAYNAIR, MARY NAME 2.2 NAME **1600 NW 159TH STREET** STREET ADDRESS 2.3 STREET ADDRESS **MIAMI FL 33169** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change __ Addition TITLE 3.1 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST- ZIP

6.4 CITY-ST-ZIP 14. I hereby 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 by an attachment with an address.

4.1 TITLE

4.2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

54 CITY-ST-ZIP

4.4 CITY-ST-ZIP

DELETE

DELETE

DELETE

SIGNATURE:

CITY-ST-ZIP TITLE

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

STREET ADDRESS

NAME

TITLE

NAME STREET ADDRESS

NAME

Directon 4/24/98

FILED

May 11 1998 8:00am

Secretary of State

Change

Change

Change

__ Addition

Addition

Addition