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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P94000035589 (8)

JEFFERSON TOWNHOMES, INC.

Principal Place of Business Mailing Address									
4315 PRAIRIE A MIAMI BEACH I		4315 PRAIRIE AVENUE MIAMI BEACH FL 33140-3	4315 PRAIRIE AVENUE MIAMI BEACH FL 33140-3014						
						3. Date Incorporated or Qualified 05/11/1994		te of Last R 2/1996	leport
	ace of Business	2a, Mailing Address				4. FEI Number 65-0499316		<u> </u>	polied For
Suite, Apt.	#. etc.	Suite, Apt #, etc.						\$8.75	ot Applicable Additional
22		27	27			5. Certificate of Status Desired Fee Required			
City & State	9	City & State	·			6. Election Campaign Financing \$5.00 May Be			
Zip	Country		Count	O/	·-··	Trust Fund Contribution			to Fees
24	25]	29	30			This corporation has liability for i     Florida Statutes	ntangible i Yes		. 199.032,
	g. Name and Address of Cur		8			10. Name and Address of New Re	gistered A	gent	
GALBUT, ABRAHAM A 999 WASHINGTON AVENUE					Name				
	8:	2	Street Add	fress (P.O. Box Number is Not Acceptab	le)				
MIAI	MI BEACH FL 33139		B:	3					**********
				1				<del></del>	
			84	4	City		FL	<b>85</b> Zip •	Code
office or r	egistered agent, or both, in the Similar with, and accept the of Signature, typed or pented manu of registere.	tate of Florida Such change was oligations of Section 607.0505, Fl	authorized t lorida Statuti	by es.	the corpora	poration submits this statement for the pation's board of directors. I hereby acception when reinstating)	t the appo	intment as	registered
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOF	RS IN 12
THTLE			1	1.1 TITLE				Change	☐ Addition
NAME	BUYSTYN, JEREMIAH 4315 PRAIRIE AVENUE		1.2 NAME						
STREET ADORESS  CITY-ST-ZIP	MIAMI BEACH FL 33140			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP					
TITLE		DELETE	2 1 TITLE		- 217			Change	Addition
NAME			2.2 NAME	E					
STREET ADDRESS			23 STRE	ET A	ADDRESS				
CITY - ST - ZIP		DE CY	2 4 CHTY-ST-ZIP		T- ZIP				
THILE		☐ DELETE	3 1 TITLE	3.1 HILE 3.2 NAME				Change Change	Addition
NAME STREET ADDRESS			3.2 NAME		ADDRESS				
CHTY-ST-ZIP			3.4. CITY		- 1				
TITLE		4.1 TITLE	:				Change	Addition	
NAME			4. 2 NAM	(E	Ì				
STREET ADORESS					ADDRESS				
CITY ST-ZIP		DELETE	4.4 CITY- 5.1 THTLE		- ZIP			☐ Change	Addition
NAME			4	5.2 NAME				onlinge	L.J Addition
STREET ADDRESS					ADORESS				
CITY - ST - ZIP			54 CITY		1				
TITLE	☐ DELETE		6 1 TITLE	6 1 TITLE			······································	Change	Addition
NAME			62 NAME	E					
STREET ADDRESS			6.3 STRE	ET #	ADDRESS				
CITY-ST-ZIP	by certify that the information con-	nlied with this filing does not age	6.4 CITY			ed in Section 119.07(3)(i). Florida Statute	e I hirthor	certify that	t the
informatic	n indicated on this are ial remort.	or supplemental applied report is	true and acc	CL II	rate and the	at my signature shall have the same lega ort as required by Chapter 607, Florida S	affact as	if made un	ider eath: that

SIGNATURE:

JENEWAHA BUJU TU

**FILED** 

Jan 16 1997 8:00am

Secretary of State