

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

FILED

May 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P94000037951 (8)

1. Corporation Name
SUNCOAST V NO. 4, INC.



Principal Place of Business 610 OPPENHEIM & ASSOCIATES 3191 CORAL WAY, STE. 800 MIAMI FL 33145	Mailing Address 610 OPPENHEIM & ASSOCIATES 3191 CORAL WAY, STE. 800 MIAMI FL 33145
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 c/o Arthur J. Furia Suite, Apt. #, etc 2601 S. Bayshore 22 Suite 600 City & State 23 Miami, FL Zip 24 33133		2a. Mailing Address 26 c/o Arthur J. Furia Suite, Apt. #, etc 2601 S. Bayshore 27 Suite 600 City & State 28 Miami, FL Zip 29 33133		3. Date Incorporated or Qualified 05/16/1994	
Country 25 USA		Country 30 USA		4. FEI Number 65-0506566 Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		10. Name and Address of New Registered Agent		\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent OPPENHEIM, STEVEN P C/O OPPENHEIM & ASSOCIATES 3191 CORAL WAY, STE. 800 MIAMI FL 33145		10. Name and Address of New Registered Agent 81 Name HKE&F REGISTERED AGENT CORP. 82 Street Address (P.O. Box Number is Not Acceptable) 2601 S. Bayshore Drive 83 Suite 600 84 City Miami 85 Zip Code FL 33133	
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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 Arthur J. Furia, V.P., HKE&F REGISTERED AGENT CORP. 4/23/98
Signature, typed or printed name of registered agent and date if applicable (NOTE: Registered Agent's signature required when reinstalling)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPT CAMOLETTO, SERGIO 3191 CORAL WAY, STE-800 MIAMI FL 33145 <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	P Arthur J. Furia 2601 S. Bayshore Drive, Suite 600 Miami, Florida 33133 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVPS RIVA, ROBERTO 3191 CORAL WAY, STE-800 MIAMI FL 33145 <input checked="" type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Arthur J. Furia, President 4/23/98 (305) 859-7700
Signature, typed or printed name of officer or director or signing officer

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