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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P94000054751**

M.B. APARTMENTS, INC.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90116 021 ***158.75



Principal Place	of Business	Mailing Address				1,188/14811		WILL DECT. CR.		
•	•									
1205 DREXEL AVENUE MIAMI BEACH FL 33139		1205 DREXEL AVENUE MIAMI BEACH FL 33139								
						DO NOT WRITE IN THIS SPACE				
						3. Date Incorpor		l		
						07/25/199	<u>4</u>			
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number				pplied For
:1	•	26				65-052866	67		· 	lot Applicable
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certifcate of S	Status Desired	\mathbf{x}		Additional
2	·	27				or Schalled C.			Fee H	Required
City & State		City & State				6. Election Cam	paign Financing		•	May Be
:3	·	28				Trust Fund C	ontribution		Added	to Fees
Zip -	Country	_ Zip	Cou	intry:	-	= -8.=This corporati	ion owes the cur	rent.year.In		
24	25	29	30			Personal Pro			∐ Yes	□No
	9. Name and Address of Current	Registered Agent		L.,		10. Name and A	ddress of New	Registered	Agent	
	4		İ	81	Name				•	
RUSS	S, DENIS A COMMUNITY			82	Street Add	ress (P.O. Box Numb	er is Not Accept	table)		
C/0 I	MIAMI BEACH DEVELOPMENT C	ORP., INC.		•••	Direct Fidul			,		
	DREXEL AVENUE			83		1,1				
MIAM	AI BEACH FL 33139				011				0E 7:-	Code
				84	City			FL	_ 85 Zip	Code,
				1 1					f changing i	s registered
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	nf Florida. Such change was :	authonzed	ז עם נ	tne corporati	poration submits this on's board of director	statement for the rs. I hereby acce	ept the appo	intment as i	egisterea
office or re agent. I an SIGNATURE ·	egistered agent, or both, in the State on familiar with, and accept the obligat	of Florida. Such change was ions of, Section 607.0505, Fl	authorized orida Stati	utes.	the corporati	on's board of director	statement for the rs. I hereby acce	ept the appo	ointment as i	egistered
office or re agent. I an SIGNATURE	egistered agent, or both, in the State of in familiar with, and accept the obligat 	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT	authorized orida Stati	utes.	the corporati	on's board of director	statement for the rs. I hereby acce	DATE		egistered
office or reagent. I am	egistered agent, or both, in the State of in familiar with, and accept the obligat 	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT	authorized orida Stati E: Registered	utes.	the corporati	on's board of director	s. Thereby acce	DATE		ORS IN 12
office or reagent. I an SIGNATURE :	egistered agent, or both, in the State of in familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI	of Florida. Such change was ions of, Section 607.0505, Florian and title if applicable. One of the control of	E: Registered	Agent	the corporati	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an SIGNATURE :	egistered agent, or both, in the State of n familiar with, and accept the obligat . Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A	of Florida. Such change was ions of, Section 607.0505, Florian and title if applicable. One of the control of	E: Registered 13. 1.1 TII	i Agent	t signature require	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florian and title if applicable. One of the control of	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST	AME	t signature require	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of n familiar with, and accept the obligat . Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. Directors Delete	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI	AME TREET TY-ST	t signature require	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florian and title if applicable. One of the control of	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII	Agent TLE AME TREET TLE TLE	t signature require	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. Directors Delete	E: Registered	Agent TLE AME TREET TTY-ST TLE AME	t signature require	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. Directors Delete	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 1.4 CI 2.1 TII 2.2 NA 2.3 ST	I Agent TLE AME TREET TLE AME TREET	t signature require ADDRESS ADDRESS	on's board of director	s. Thereby acce	DATE	ND DIRECT	ORS IN 12
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE	E: Registered	I Agent TLE AME TITY-ST TLE AME TREET TITY-ST TLE AME	t signature require ADDRESS ADDRESS	on's board of director id when reinstating) ADDITIONS/C	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition
office or re agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. Directors Delete	E: Registered 13. 1.1 TTT 1.2 NA 1.3 ST 1.4 CF 2.1 TTT 2.2 NA 2.3 ST 2.4 C 3.1 TTT	I Agent TLE	t signature require ADDRESS ADDRESS	on's board of director id when reinstating) ADDITIONS/C	s. Thereby acce	DATE	ND DIRECT	ORS IN 12 Addition
office or re agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE	13.	Agent TLE TLE TREET TTLE TREET TTLE TREET	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP	on's board of director id when reinstating) ADDITIONS/C	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition
office or re agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE	13.	Agent TLE AME TREET TLE AME TREET TLE TTLE TTLE TTLE TTLE TTLE TTL	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP	on's board of director id when reinstating) ADDITIONS/C	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie if applicable. (NOT D DIRECTORS DELETE	13.	I Agent TLE THE TY-ST	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP	on's board of director id when reinstating) ADDITIONS/C	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition
office or re agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE	### 13. #### 13. ### 13. ### 13. ### 13. ### 13. ### 13. ### 13. ### 13. ### 13. ### 13. ### 13. ### 1	I Agent TLE AME IREET TLE AME IREET TLE AME IREET TLE AME IREET TLE TLE AME IREET TLE	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP	on's board of director id when reinstating) ADDITIONS/C	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition
office or re agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS CITY-ST-ZIP TITLE NAME	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie if applicable. (NOT D DIRECTORS DELETE	### 13. ### 1.1 ### 1.2 NA	I Agent TLE AME TREET TLE AME TREET TLE TREET	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie if applicable. (NOT D DIRECTORS DELETE	### 13. #### 13. ### 1	Agent TLE AME TREET TLE AME TREET TLE AME TREET TLE TREET TLE AME TREET TLE TREET TLE TREET TLE TREET TLE TREET	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition
office or re agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE INAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST 4.4 Cf	I Agent TLE AME IREET ITLE IREET I	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie if applicable. (NOT D DIRECTORS DELETE	13.	Agent TLE AME TREET TLE AME TREET TLE AME TREET TLE TREET TLE TREET TLE TREET TITLE	t signature require ADDRESS 1-ZIP ADDRESS T-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE DELETE	E: Registered 13. 1.1 TII 1.2 NA 1.3 ST 2.4 CC 3.1 TII 3.2 NA 3.3 ST 3.4 CC 4.1 TII 4.2 NA 4.3 ST 4.4 Cf 5.1 TI 5.2 NA	I Agent I Agent I Agent I Agent I Agent I AME I REET I LE AME	t signature require ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE DELETE	### 13	TUE THE THE THE THE THE THE THE THE THE TH	t signature require ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie of applicable. (NOT D DIRECTORS DELETE DELETE DELETE	E: Registered 13. 1.1 TIT 1.2 NA 1.3 ST 2.4 CC 3.1 TIT 3.2 NA 3.3 ST 3.4 CC 4.1 TIT 4.2 NA 5.3 ST 5.4 CC 5.1 TIT 5.2 NA 5.3 ST 5.4 CC	TILE TILE THE THE THE THE THE THE THE THE THE TH	t signature require ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition Addition
Office or reagent. I an agent. I an agent. I an signature: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and title if applicable. (NOT D DIRECTORS DELETE DELETE	### 13	TAGENT TILE AME TILE AME TILE AME TILE AME TILE AME TILE AME TILE	t signature require ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition Addition
office or reagent. I an agent. I an SIGNATURE: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie of applicable. (NOT D DIRECTORS DELETE DELETE DELETE	### 13	TAGENT THE AME TREET THE AME TREET THE AME TREET THE TREET THE AME	t signature require ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition Addition
Office or reagent. I an agent. I an agent. I an signature: 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	egistered agent, or both, in the State of n familiar with, and accept the obligat Signature, typed or printed name of registered agent OFFICERS ANI D RUSS, DENIS A 1205 DREXEL AVENUE	of Florida. Such change was ions of, Section 607.0505, Florida and trie of applicable. (NOT D DIRECTORS DELETE DELETE DELETE	### 13	TAGENT THE AME TREET THE AME TREET THE AME TREET THE TREET THE AME	t signature require ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP ADDRESS 1-ZIP	on's board of director	HANGES TO OF	DATE	ND DIRECT Change	ORS IN 12 Addition Addition Addition Addition

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under oath, that I am at officer or director of the corporation or the ecciver 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, with all other like empowered.