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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P94000090691**1. Corporation Name

HANDLEY PROPERTIES, INC.

Principal Place of Business

Mailing Address

9159 SW 77TH AVENUE STE. 305 MIAMI FL 33156

9159 SW 77TH AVENUE STE. 305 MIAMI FL 33156

FILED Feb 16, 1999 8:00am **Secretary of State**

02-16-1999 90059 018 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					12/15/1994	, -,			
2. Principal Place of Business 2a. Mailing Address					4: FEI Number		Apr	lied For	
21	26				59-1655614		Not	Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.		^-			5. Certificate of Status Desired		\$8.75 A	I	
27						Fee Rec			
City & State City & State					6. Election Campaign Financing		\$5.00	, ,	
23 28				Trust Fund Contribution Added to Fe			Fees		
Zip	Country	Zip	Country		8. This corporation owes the curr	ent year In			
24	25	29 3	10		Personal Property Tax.			□No	
	9. Name and Address of Current	81		10. Name and Address of New I	Registered	Agent			
DATRICIA I LIANDI EV				Name					
PATRICIA L. HANDLEY				Street Add	ress (P.O. Box Number is Not Accept	able)			
9159 S.W. 77TH AVE.				A ANN COMPANY OF AN ARCHITECTURE OF THE CONTROL OF					
UNIT #305							2000年3月2日本 1000年3月2日本		
MIAMI FL 33156				014	4 (12 Mer. 1994) 1 Sept. 1 1	- 1.3. [1.3.	85 Zip C		
				City		Fl	_ 65 2.00		
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									
agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	Signature, typed or printed name of registered agen	And title if applicable (NOTE: P	Pagistared Ager	et signature require	ed when reinstating)	, DATE .			
12.	OFFICERS AN		13.	er organization to equino	ADDITIONS/CHANGES TO OF			RS IN 12	
	PD	☐ DELETE	1.1 TITLE		2 1 2 2 2 2 2 3		☐ Change	☐ Addition	
TITLE	HANDLEY, M L		1.2 NAME					Ì	
NAME	9159 SW 77TH AVENUE STE.	205		T A DODESE				.	
				TADORESS				'	
CITY-ST-ZIP	MIAMI FL 33156	☐ DELETE	1.4 CITY-S	T-ZIP			Change	Addition	
TITLE	SD DATE(OLA I	C) DELETE	2.1 TITLE				onerige		
MANUE CONTRACTOR CONTR			2.2 NAME						
STREET ADDRESS 9159 SW 77TH AVENUE STE. 305			2.3 STREE	TADDRESS					
CITY-ST-ZIP	MIAMI FL 33156		2.4 CITY-5	ST-ZIP				C Addition	
TITLE	<u>"</u>	☐ DELETE	3.1 TITLE				Change	☐ Addition	
NAME	*** **		3.2 NAME						
STREET ADDRESS			3.3 STREE	T ADDRESS	机长 寶德 计二件部	1 1 1 1 1 1 1 1	Jagor the M		
CITY-ST-ZIP			3.4. CITY-S	ST-ZIP				1975 Califfe	
TITLE		☐ DELETE	4,1 TITLE		14 - 17 - 17	. 14-	☐ Change	Addition	
NAME			4.2 NAME					.	
STREET ADDRESS			4.3 STREE	T ADDRESS				,	
CITY-ST-ZIP			4.4 CITY-S						
TITLE		☐ DELETE	5.1 TITLE			. ,	☐ Change	☐ Addition	
1			5.2 NAME			3 .		}	
NAME			5.3 STREE	TADDRESS					
STREET ADDRESS	f 1 ·		5.4 CITY - S	1					
CITY-ST-ZIP	<u> </u>	☐ DELETE	6.1 TITLE				Change	Addition	
TITLE			6.2 NAME						
NAME			1	TADDRESS					
STREET ADDRESS								Ì	
CITY-ST-ZIP	_ *.		6.4 CITY-5	I-ZIP	·		·		

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 charged, o on an attachment with an address, with all other like empowered.

SIGNATURE: