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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000091270 (6)

INTERACTIVE PROPERTIES, INC.

FILED Apr 14 1998 8:00am Secretary of State



Mailing Address c/o Joseph. F. Lopez, Esq. 250 BIRD ROAD. #302 Principal Place of Business 250 BIRD ROAD. #302 CORAL GABLES FL 33146 **CORAL GABLES FL 33146** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/14/1994 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 21 26 65-0549396 Not Applicable Suite, Apt. #, etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Regulred 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country This corporation owes or has paid the current year Intangible 25 24 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LOPEZ, JOSEPH F ESQ. 250 BIRD ROAD, SUITE 302 R2 Street Address (P.O. Box Number is Not Acceptable) CORAL GABLES FL 33146 83 84 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 Signalute, typod or peoled name of registered agent and to lif applicable (NOTE Registrated Agent signature required when reinstaling) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition PST 1.1 TITLE TITLE NAME **WIENER, STEVEN** 1.2 NAME 250 BIRD ROAD, SUITE 302 STREET ADDRESS 1.3 STREET ADDRESS **CORAL GABLES FL 33146** 14 CITY-S1-7IP CITY-ST-ZIP DELETE Change ■ Addition TITLE ast 2.1 TITLE LOPEZ, JOSEPH F ESQ. 22 NAME NAME 250 BIRD ROAD, SUITE 302 STREET ADDRESS 2.3 STREET ADDRESS **CORAL GABLES FL 33146** CITY-ST-ZIP 2. 4 CiTY - \$1 - ZiP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST- 7IP CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - \$1 - 2IP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREE1 ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. Thereby 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 13 of changed, or on an attachment with an address.

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