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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

STREET ADDRESS CITY-ST-ZIP



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

May 02 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000011372 (6)

CASA VALENCIA REALTY MANAGEMENT CORP.

Principal Place of Business 4400 NW 21ST ST. #105 LAUDERHILL FL 33313		Mailing Address			1 10013662 550 10107 01111 00111 00111 00111 60111 61111 5110 5110		
		4400 NW 21ST ST. #105 LAUDERHILL FL 33313-4248					
					3. Date Incorporated or Qualified 02/08/1995	3a. Date of Last Report 04/25/1996	
Principal Place of Business 21		2a. Mailing Address 26			4. FEI Number 65-0555215	Applied Fo	
Sulte, Apt.	. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additions	
City & Star 23	le	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25	Zip 29	70 Cour	ntry	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032 Yes 🔲 No	
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New Reg	jistered Agent	
	HAN, ABRAHAM			B1 Name			
4400 NW 21ST ST. #105 LAUDERHILL FL 33313			-	B2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
				83			
				B4 City		FL 85 Zip Code	
11. Pürsuant office or i agent. La	to the provisions of Sections 607.050; registered agent, or both, in the State am familiar with, and accept the obliga	2 and 607 1508, Florida Statu of Florida. Such change was itions of, Section 607 0505, F	ites, the ab authorized lorida Stati	ove-named or by the corpo ites.	orporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing its registe I the appointment as registere	
SIGNATURE	Signature, typed or printed frame of registered ago:				quired when rems(aling)	DATE	
12.	OFFICERS AND		13.	Agent signature re	ADDITIONS/CHANGES TO OFFICE		
TITLE	DP	DELETE	1110	F T	ADDITIONS/CHANGES TO OFFIC	Change Add	
NAME	KAHAN, ABRAHAM		1.2 NA	-		C change C Von	
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NAME	KAHAN, SARA	Detric	2.1 M			Change [] Aud	
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NAME			6.2 NA	ı.			

14. I do 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 of 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

or on an attachment with an address.