FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996	DIVISION OF	CORPORATIONS			
DOCU 1. Corporation	MENT # P950	00024248 (3)			
1 '	R PRICE PROPERTIES, INC.	`	•			
Principal Plac	e of Business	BAGROO A MAL				
14847 BALGOWAN ROAD. #203 MIAMI LAKES FL 33016 MIAMI LAKES FL 33016 MIAMI LAKES FL 33010				ı tenitanı lik inter Gisti Allili I	SALLES MASSES MAINT LIBER MSMIT	A CARAL DEDAG INTE (RAL
			ROAD. #203 016			
2 Principal D	Place of Business	· · · · · · · · · · · · · · · · · · ·		3. Date Incorporated or Qualified 03/27/1995	3a. Date of Last	Report
	A BOX 8219/1	2a. Mailing Address	20.00.11	4. FEINI mha	<u></u>	Applied For
Suite, Apt.		26 F: O BOX S Suite, Apt. #, etc.	2911	60 05 1484	7	Not Applicable
22 City & Stat	α	27		5. Certificate of Status Desired		5 Additional Required
23 Sou	th Florigh, FL	City & State South flo.	cida, PL	Election Campaign Financing Trust Fund Contribution	\$5.0	00 May Be
Ζip	Country	Zip	Country	8. This corporation has liability for	intennible tay under	ed to Fees
24 2008	2 - /9 // 25 USA 9. Name and Address of Curren	29 33082-1911	30 USA	Florida Statutes	i □ No	8 189.032,
	o, Mario and Address of Curren	r negistereo Agent	81 Name	Name and Address of New F	Registered Agent	
MARTINEZ, CARLOS				CARLOS MACTIONS		
14847	BALGOWAN ROAD, #203		82 Street Add	tress (P.O. Box Number is Not Acceptable)		
MIAMI LAKES FL 33016			83	55.W. 166 AVC		
•	- 4120 (2 000 (0					
			84 City Pre	Broke Pines	85 Z	rp Code
 Pursuant to or register 	to the provisions of Sections 607.0502 ed agent, or both, in the State of Florid	and 607.1508, Florida Statute	s, the above-named corpo	ration submits this statement for the pure and of directors. I hereby accept the appropriate the pure appropriate	roose of changing its	3027
familiar wit	th, and accept the obligations of, Section	on 607.0505, Florida Statutes.	d by the corporation's boa	ard of directors. I hereby accept the app	ointment as registere	d agent. I am
	Signature, typed or printed name of registered agent a					
12.	OFFICERS AND		E: Registered Agent signature require		DATE	
TITLE	D	DELETE	13.	ADDITIONS/CHANGES TO OFF	C-12	
NAME	MARTINEZ, CARLOS		1.2 NAME		L_] Change	Addition
STREET ADDRESS	14847 BALGOWAN ROAD, #	!203	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI LAKES FL 33016		1.4 CITY - ST-ZIP			
THLE	D	DELFTE	2. 1 TITLE		Change	Addition
NAME	MARTINEZ, LORRAINE		2 2 NAME			
STREEL ADDRESS 14847 BALGOWAN ROAD, #203 DITY-ST-ZIP MIAMI LAKES EL 33016		2 3 STREET ADDRESS				
TITLE	MIAMI LAKES FL 33016	Fil Driete	2 4 CITY - ST - ZIP			
NAME		DELETE	3.1 TIRE : 4		☐ Change	☐ Addition
STREET ADDRESS			3 2 NAME			
CITY-S1-ZIP			3.3. STREET ADDRESS 3.4 CITY - ST - ZIP			
TITLE		DELETE -	4. 1 TITLE		[7] (haaa	F-3 A LEV
NAME			4.2 NAME		☐ Change	Addition
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 City-St-ZiP			
TITLE NAME		☐ DELETE	5 1 TITLE		☐ Change	Addition
STREET ADDRESS			5.2 NAME		•	_
CITY-ST-ZIP			5.3 STREET ADDRESS			
TITLE		DELETE	5.4 CITY - ST- ZIP	800001 83	:835A_	
NAME		FI percit	6 1 TITLE 6 2 NAME	8000018 -05/24/960103	35005 ^{Change}	Addition
STREET ADDRESS			6.3 STREET ADDRESS	***200.00		51,
CITY - ST - ZIP			6.4 CITY - ST - ZIP			1'30
14 I do hereby	codify that the information are all at the					/

I to hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 Ellock 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954) 450 -- 1975 Dayline Phone ii