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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000032178 (2)

CORTEZ COMMONS CORPORATE, INC.

Principal Place of Business

Mailing Address

## APPROVEL AND FILET

97 APR 29 PH 2: 16

SECRETARY OF STATE TALLAHASSEF, FLORIDA



1733 FLETCHER AVE. TAMPA FL 33612				1733 FLETCHER AVE. TAMPA FL 33612-1820					•				
									3. Date incorporated or Qualified 04/25/1995		te of Last R 1/1996	eport	
2. Principal Place of Business			28	2a, Mailing Address					4. FEt Number		An	plied For	
es			26	26					59-3317804			t Applicable	
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A		
City & State			28	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Z(p 24	Country 25			Zip Country <b>30</b>			ηlry		8. This corporation has liability for intangible tax under s. 199 032, Florida Statutes Yes No				
	9, Name an	d Address of Currer	nt Regi	stered Agent					10. Name and Address of New R	gistered	Agent		
WAI	LTERS, CLIFFO	ORD L					81	Name					
802 11TH STREET WEST BRADENTON FL 34205							82	Street A	Address (P.O. Box Number is Not Acceptable)				
UI VI	DENTON	7200				r	83						
							84	City		FL		Code	
office or	registered agen am familiar with,	t, or both, in the State and accept the oblig	e of Flor ations o	rida Such cha of, Section 60	ange was a 7.0505, Flo	authorized orida Stati	i by utes	the corpo	corporation submils this statement for the oration's board of directors. I hereby accorporate the statement of the equired when reinstating)	purpose of	oinIment as	registered	
40	Signature, typed or p	orinted name of registered agr OFFICERS AN			(14/5)1	18.	F Age	it signature i	ADDITIONS/CHANGES TO OFFI		DIRECTOR	25 101 22	
TITLE	<b>∠POS</b>	OFFICE NO AN	ITA TAILUE		DELETE	1.1 711	1.5		ADDITIONS/GHANGES TO GITT	OLI 10 AINL	Change	Addition	
	BARNES, TE	DECA		٠.	PLULIE	1.2 NA			commo	1 62 4			
NAME						1			900002 %/80-	# 100 mm 7070	11 50 J	.001	
STREET ADDRESS								ADDRESS	_U3CU= 1Catatak	/ 31   " (	*******	66 00 .001	
CITY-ST-ZIP		_ 33733-2749			DC) F F F	14 CI				ວວ. ບບ	X Change	Addition	
TITLE	VI	ASAIP I		السا	DELETE	2 1 111		1	VTD		LA Change	FT Magnion	
NAME	RICE, SUZA					22 NA			Rice, Suzanne L.				
STREET ADDRESS	1733 FLETC							ļ	1733 Fletcher Ave. Wes	31			
CITY-ST-ZIP	TAMPA FL	33612			DELETE	2. 4 CI		T-ZIP	Tampa, FL 33612		Change	Addition	
TITLE	D	MADY A		البا	DELETE	3.1 TI		İ			Change	[_] Modilion	
NAME	FERRUCCI,					3.2 NA							
STREET ADDRESS								ADORESS					
CITY-ST-ZIP	TAMPA FL	3012			DELETE	3.4. CI		11-ZIP	_		X Change	Addition	
TITLE	SD DICK	IADD			VIIIL	4.1 1/1			<b>S</b> .		TOTAL CHICAGO	III MODITION	
NAME OVERET ADDRESS	LEVIN, RICH	ianu XWOOD RIDGE R	n			4. 2 N		1	Levin, Richard				
STREET ADDRESS	SARASOTA		U.						7646 N. Lockwood Ridge	e Rd.			
CITY-ST-ZIP TITLE						4.4 Ct	11.2	1 - ER"	Sarasota, FL 34243				
TITLE	ONINOUIN	16 01610		<del></del>	DELETE	51.10	TI F				Change	Addition	
NAME	ONINOUN	16 01210			DELETE	5.1 1II 5.2 NA					Change	Addition	
NAME expect aponent		16 04240			DELETE	5.2 NA	ME	AUUBEGG			Change	Addition	
STREET ADDRESS		16 04240			DELETE	5.2 NA 5.3 ST	AME Reet	ADDRESS			Change	Addition	
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STREET ADDRESS CITY-ST-ZIP		1 6 012-10				5.2 NA 5.3 SI 5.4 CF 6.1 TI 6.2 NA	AME HEET TY-S TLE AME			1/29			

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 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 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 12 if changed, or on an attachment with an address.

CR2E034 (9/96)