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

	MENT # P95000 EW APARTMENTS, INC.	0033473 (6)		111 0.0 11111 01 0 11 1 100.0 1110 12 0 1
Principal Place of Business Mailing Address					TIPE THIS BLOCK LEADER LINK TEAT
2000 DOUGLAS ROAD 2 911 DOUGLAS CENTRE 9		2600 DOUGLAS ROAD 911 DOUGLAS CENTRE CORAL GABLES FL 33	:	DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	3 SPACE
				· · · · · · · · · · · · · · · · · ·	
2. Principal Place of Business 2a. Mailing Address				04/28/1995 4. FEI Number	Applied For
21 26			65-0585445	Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22 27			5. Certificate of Status Desired	Fee Required	
City & State City &		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the co	
24	25 S. Name and Address of Current	29	30]	Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
110		I Hagistolou Agoitt	81 Name	10, Name and Address of New Hogistered	, Agoill
LUSTIN, HUT H					
2600 DOUGLAS ROAD 911 DOUGLAS CENTRE			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33134			83		
00174 0010101			24 0		
			84 City	FI	
SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation of the state		utes, the above-hamed cos a authorized by the corpor Florida Statutes.	orporation submits this statement for the purpose ration's board of directors. I hereby accept the appuishment reinstating) DATE	or changing its registered pointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	AS	DELETE	1.1 TITLE		Change Addition
NAME	LUSTIG, ROY R		1.2 NAME		
STREET ADDRESS	2600 DOUGLAS ROAD 911 D	OUGLAS CENTRE	1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL 33134	DELETE.	1.4 CITY-ST-ZIP		Discount Distriction
TITLE	DP	L. DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BERNAL, JESUS R	OUGLAS CENTRE	2.2 NAME 2.3 STREET ADDRESS		
1 /	STREET ADDRESS 2600 DOUGLAS ROAD 911 DOUGLAS CENTRE DITY-ST-ZIP CORAL GABLES FL 33134				
CITY-ST-ZIP TITLE	COUNT ONDIES LE 30194	DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME		<u> </u>	3.2 NAME		and according to the control of
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	:	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	er Company The second	Change Addition
NAME	:		5.2 NAME	Å 3	
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Therese	5.4 CITY-ST-ZIP		Change (Addition
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME	n		6.2 NAME)
STREET ADDRESS			6.3 STREET ADDRESS		

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 proof or supplemental annual proof is five 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 of this tension of the corporation or the receiver of this tension of the corporation or the receiver of this tension of the corporation or the receiver of this tension of the corporation or the receiver of this tension of the corporation or the receiver of this tension of the corporation or the receiver of this tension of the corporation or the receiver of this tension of the corporation or the receiver of the corporation or the receiver of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the corporation or the receiver of the corporation of the receiver of the re

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Mar 17 1998 8:00am

Secretary of State