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 # **P95000053721**

ZARDOYA APARTMENTS, INC.

OSMAN, L. MICHAEL

1474-A WEST 84 STREET

Principal Place of Business Mailing Address **B630 S.W. 47 TERRACE** 8630 S.W. 47 TERRACE MIAMI FL 33155-5450 MIAMI FL 33155 3. Date Incorporated or Qualified 3a. Date of Last Report 07/07/1995 08/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-1725738 26 Suite, Apt #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Ζıp Country Country 8. This corporation has liability for intangible tax under s. 199.032, 25 ☐ Yes ☐ No 24 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent

HIALEAH FL 83 84 City Zip Code 85

81

82

Name

Street Address (P.O. Box Number is Not Acceptable)

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 Signature, typing or priving hamic of registered agent and little if applicable (NOTE: Registered Agent signature required when re-instating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13, PTD DELETE TITLE Change Addition 1.1 TITLE ZARDOYA, JORGE NAMÉ 1.2 NAME 8630 S.W. 47 TERRACE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33155** CITY - \$1 - 7IF 1.4 City-ST-ZiP DELETE TITLE 21 TITLE Change ■ Addition ZARDOYA, MARIA I NAME 22 NAME 8630 S.W. 47 TERRACE STREET ADDRESS 23 STREET ADDRESS MIAMI FL 33155 CITY - ST - ZIP 2. 4 CITY - ST - ZIP DELETE TITLE 3.1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-7P 3.4. CITY-ST-ZIP DELETE 4.1 TITLE THEF Change Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZF 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-SI-ZIP 6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi). 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 12 or Block 13 if changed, or on an attachment with an address.



Applied For

Fee Required

Added to Fees

Not Applicable

FILED

Feb 11 1997 8:00am

Secretary of State