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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000066971 (9)

CLARA MAR HOUSING CORP.

## FILED May 01 1998 8:00am Secretary of State

ULANA	MAN HOUSING CORP.					
Principal Place	e of Business	Mailing Address				#144# #111# \$#111 (###) ### I##
201 ALHAMBRA CIR., STE. 1200 201 ALHAMBRA CIR., STE. CORAL GABLES FL 33134 CORAL GABLES FL 33134			E. 1200			
					DO MOT MIDITE IN EN	
					DO NOT WRITE IN TH	IS SPACE
					3. Date Incorporated or Qualified	
9 Principal Pi	ace of Business	2a. Mailing Address			08/23/1995 4. FEI Number	Analiad For
21 P.O. Box 520 682 26			Address		65-0609866	Applied For Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc						\$8.75 Additional
22 ~					5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23 MIGH	ufl	28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Сош	ntry	8. This corporation owes or has paid the	current year Intangible
24 33/52		29	30		Personal Property Tax due June 30.	Yes No
	9, Name and Address of Curren	I Registered Agent		Y	10, Name and Address of New Register	ed Agent
	MEZ, PAULA C.			81 Name		
5870 SW 8TH STREET			ļ	B2 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
SUITE 7						A
MIA	MI FL 33144			63		
			ŀ	84 City		85 Zip Code
			]			· <b>L</b>   _L
office or re	o the provisions of Sections 607 050 egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was a	authorized	by the corpo	orporation submits this statement for the purpose ration's board of directors. I hereby accept the a	or changing its registered ippointment as registered
SIGNATURE	Signature, typed or printed name of regulared age	POM Control of the Inc. Inc.	L. Clogietered	Seem signaliya	quireo when reinslating) DATE	
12.	OFFICERS AND	<del></del>	13,	Wilett eitherna te	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1.1 10	LE	7.55(1.516)-0.17.1325-1-5-0.17.527.63	Change Addition
NAME	BOLANOS, JORGE		1.2 NA	ME		•
STREET ADDRESS	PARA AM ATH ATREET AND T		1.3 STI	REET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CIT	Y-ST-ZIP		
TITLE		DELETE	2.1 TIT	LE		☐ Change ☐ Addition
NAME			2.2 NA	ME		
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CITY-ST-ZIP			2. 4 CI	TY-ST-ZIP		
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STREET ADDRESS			3.3 ST	REET ADDRESS		
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TITLE		☐ DELETE	5.1 TIT	ſ		Change Addition
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STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CIT 6.1 TIT	Y-ST-ZIP		☐ Change ☐ Addition
NAME		C) otter	6.2 NAI	1		C Avenille C Ventricit
- 1						
STREET ADDRESS				REET ADDRESS		
14. I hereby c	ertify that the information supplied w	n this filing does not qualify to	or the exe	Y-ST-ZIP   mption stated	in Section 119.07(3)(i), Florida Statutes. I further	certify that the information
indicated of officer or of	on this annual report or supplemental	annual report is true and acc	urate and	that my signa	ature shall have the same legal effect as if made equired by Chapter 607, Florida Statutes; and the	under oath; that I am an

brae L. Bolanos