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

PROFIT CORPORATION ANNUAL REPORT 2000



FLORIDA DEPARIMENT OF STATE Sandra B. Mortham
Secretary of the

DIVISION OF CORPORATIONS

DOCUMENT #

74 STREET APARTMENTS, INC.

Principal Place of Business Mailing Address page 1str FILED

00 JUN 22 AM 9: 32

STORETARY OF STATE TALLAHARSEE, FLORIDA

				DO NOT WRITE IN THIS	SPACE .
				3. Date Incorporated or Qualified	
				10-02-95	
2 Principal P	Place of Business	2a. Mailing Address		4. FEt Number	Applied For
21 13954		26 13954 SW	36 ST	65-0624927	Not Applicable
Suite, Apt.	, 200	Suite, Apt. #, etc.	7, 2,		\$8.75 Additional
22	.,	27		5. Certificate of Status Desired	Fee Required
City & Stat	e e e e e e e e e e e e e e e e e e e	City. & State		6. Election Campaign Financing	\$5:00 May Be
23 MIA	MI FL	28 M (AM)	12	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	rrent year Intangible
24 33175	-6721 25	29 33175-6721 3	30	Personal Property Tax due June 30.	☐ Yes ☐ No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
c~P	AGOA AUL D		81 Name		
cordero, ANA D			82 Street Address (P.O. Box Number is Not Acceptable)		
	5 SUNSET DRIVE	•	of det Address (1.0. Box National is Not Acceptable)		
5te	- A-d9a		83		
MIL	MI, FL 33173-3228	;	Of The Code		
1 1 ()	1-11,12 11111 3000		84 City	· FL	85 Zip Code
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					
-uffice 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, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agent signature re	quired when reinstating) , DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE	PT	DELETE	1.1 TITLE		Change
≝ NAME	DIAZ ALEJANDRO		1.2 NAME		ļ
STREET ADDRESS	13954 SW 36 ST		1.3 STREET ADDRESS	9000033256	:398
	MIAMI FL		1.4 CITY - ST - ZIP	-07/18/0001	004027 * 中央記事
TITLE	VPS	☐ DELETE	2 1 TITLE	, *****G15.UU	作を形ではngeコーロル Addition
NAME	DIA-Z-CORDGRO, ANA		: 2.2 NAME	•	
STREET ADDRESS	DIAZ-CORDGRO, ANA 9485 SUNSET DR #	1292	2 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI, FL 33183	والمراجع المراجع المحاجد والمحاجد والمح	2. 4 CITY: ST::ZIP.		
MARK 2 :	<u> </u>	DELETE	31 11112		Change - Addition:
NAME			3 2 NAME		
STREET ADDRESS			3 3 STREET ADDRESS		
CITY-ST-ZIP			34 CITY-ST-ZIP		
TITLE		L_ DELETE	4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS	,		4.3 STREET ADDRESS		Í
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	51 TITLÉ		Change Addition
NAME	interest of the second	· · · · · · · · · · · · · · · · · · ·	5 2 NAME	,	
STREET ADDRESS	·		5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
TITLE		. DELETÉ	6 I TITLE		Change Addition
NAME			6 2 NAME	01- 00	
STREET ADDRESS			6.3 STREET ADDRESS	96-00 UBR TO	
CITY-ST-ZIP		n 1 P	6 4 CITY - ST - ZIP		5
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 report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 on on attachment with an address.					
SIGNAT	URE: Allund	a /d Ak	EJANDRO D	IAZ 4/28/00 (30	6)776:2327
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Intel Printer Prin					

13954 SW 36th Street Miami, Fl 33175 June 19, 2000 Letter # 100A00032197

Florida Department of State P.O.Box 6327 Tallahassee, Florida 32314

To Whom It May Concern:

I am writing to you because the reason that I have not paid my dues is because I have not received any bills. It seems that the bills were being sent to the physical address and not the mailing address. I would like for all correspondence to be sent to 13954 SW 36th Street, Miami, Fl 33175. I am sending you a check for \$815.00; I spoke to someone in your office and was told to send this amount. Please excuse my tardiness and if you have any questions please cal me at 1(305) 776-2327. Thank you and have a good day.

Respectfully,

74 Street Apartments Inc.