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

Mailing Address

777 17TH STREET

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000078109

1. Corporation Name

Principal Place of Business

777 17TH STREET

EQUITY ONE (LAKE MARY) INC.

PENTHOUSE MIAMI BEACH FL 33139			PENTHOUSE MIAMI BEACH FL 33139					DO NOT WRITE IN THIS SPACE									
MIAMI DEACH I	L 33133		MIAMI DENO	112 00100				3.	Date	Incorpor	ated or	Qualife	ed				
								1	10/0	5/199	5				:		.
2. Principal Pl	Address				4.	FEIN	lumber						Appli	ed For			
21		26						65-0	61495	8					Not A	Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5	Certif	cate of S	atatus I	Desired			T		ditional	
22		27						Octu	Cate Of C		J031100			Fee	Requ	ired	
City & State	9	City & State					6.	Elect	on Cam	paign f	inancin	g 🗆				ay Be	
23		28							Fund C	,					ed to	Fees	
Zip	Co	ountry	Zip	Zip Country				8.		corporati			urrent y			٠	141.
24	25	이					nal Proj					Yes		No			
	9. Name and A	ddress of Current	Registered Age	ent	81	Nie	ame	10.	Nam	e and A	aaress	Of Nev	v Kegis	tered A	gent		
MAD	CUS, ALAN J ES	ي. د			"	INC	ine										
1			82	St	reet Addre	ess (P	P.O. Bo	x Numb	er is N	ot Acce	ptable)						
20803 BISCAYNE BLVD. STE 301 NO. MIAMI BEACH FL 33180					83												
NO.	MILANII DEACITTI	_ 33100			83	'											
}	. ^		Λ		84	Ci	ty								85 2	Zip Co	de
						<u> </u>								<u> </u>	<u> </u>	- ito -o	niata sa d
11. Pursuant	to the provisions of	Sections 607.0502 both, in the State of accept the obligati	and 607 1508. f Florida, Such d	Florida Statutes, :hange was auth	, the abov norized by	the	med corpo corporatio	oration m's bo	n subr	nits this director	statem s. I he	ent for ti reby acc	ne purpo cept the	ose of c appoin	nanging tment a	s regis	stered
agent. I ar	m familial with, and	accept the obligati	ons of Section (607.0505, Florid	a Statutes	3.	·					•	•				
SIGNATURE	\]\ <i>\</i> \\\	~\/	$M \subseteq M$								_						
	Signature, types or printed		and title if applicable.	(NOTE: Re	egistered Age	nt sign	ature required			g) TONS/C	HANGI	S TO (ATE RS ANI	DIREC	CTOR	S IN 12
12.	100	OFFICERS AND		DELETE	1.1 TITLE			·····		1011070			JI 1 10L		Char		Addition
TITLÉ	VP	SAL	'	OCCETE	1.1 TILE										<u> </u>	-	
NAME	VALERO, DORO					T 400	2500										
STREET ADDRESS	777 17TH ST P				1.3 STREE		KESS										
CITY-ST-ZIP	MIAMI BEACH	FL 33139		DELETE	1.4 CITY-5 2.1 TITLE	SI-ZIP									Char	nge	Addition
TITLE		4114	'	DLLL IL	2.1 IIILE 2.2 NAME											•	
NAME	KATZMAN, CH					T 400	DECC.								. *		
STREET ADDRESS	777 17TH ST P				2.3 STREE		- 1										
CITY-ST-ZIP	MIAMI BEACH	FL 33139		☐ DELETE	2. 4 CITY- 3.1 TITLE	SIZIF	<u> </u>								Char	nge	Addition
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TITLE				L_ 0000,0	4. 2 NAME												
NAME					4.3 STREE		DECC										
STREET ADDRESS					4.4 CITY-5												
CITY-ST-ZIP TITLE				☐ DELETE	5.1 TITLE	31-ZP									Char	nge	Addition
!					5.1 NAME		-								,	-	
NAME					5.3 STREE		RESS										
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)					6.2 NAME		1								_	•	_
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STREET ADDRESS	I	\wedge					1										

14. I 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 supplied that 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 teceiver 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, of an an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

FILED

Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90064 027 ***150.00