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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P95000083520 (3)

CASA GRANDE PROPERTIES, INC.

.Prin	cipal	Place	of	Business
	_			

Mailing Address

## FILED Jun 18 1997 8:00am Secretary of State



8355 BW 6TH 8T. MIAMI FL 33144			1757 W 62ND ST. HIALEAH FL 33012-6103			,				
					3. Date incorporated or Qualified 10/27/1995 3a. Date of Last Report 07/09/1996					
2. Principal Place of Business		F	2a. Mailing Address		4. FEI Number	مسواره ار	Applied For			
Suite Apt # etc			26			APPLIED FOR 65-06		Not Applicable		
Suite, Apt. #, etc.			27			5. Certificate of Status Desired Fee Required				
City & State	e	28	City & State	e e		6. Election Campaign Financing Trust Fund Contribution		.00 May Be ided to Fees		
, Zip	Country Zip			Country		8. This corporation has liability for intangible tax under s. 199.032.				
24	25	29		30						
3	9. Name and Add	ress of Current Regis	tered Agent			10. Name and Address of New Re	gistered Agent			
JUL	A, ROBERT JAMES			81	Name					
1757	W. 62ND STREET			82	Street A	ddress (P.O. Box Number is Not Acceptal	201			
, HIAL	EAH FL 33012			-	)	interpolation for the state of	110)			
1 1				B3						
				84	City		85	Zip Code		
44 Surguant	to the provisions of C	etions 607 0500 and 6	37 tEOO Florido Statu	to a the short	2 20224	corporation submits this statement for the p	FL <sup>85</sup>	Jacobs and Indone		
office or r	registered agent, or bo im familiar with, and a	oth, in the State of Floric scept the obligations of	fa. Such change was , Section 607.0505, Fl	authorized b lorida Statute	y the corpo s.	oralion's board of directors. I hereby acce	pt the appointme	nt as registered		
12.	Signature, lyped or printed no	one of registered agent and title		II : Registered Ag	ent signature re	equired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE DEDO AND DIDEC	OTODO IN 10		
TITLE	<b>D</b>	OFFICERS AND DIREC	DELETE	1.1 TOLE		TREASUER.	Chi			
NAME	JULIA, ROBERT J		_ Meete	1.2 NAME	i	INTENDUENC:	₩ One	inge Autilion		
STREET ADDRESS	1757 W 62ND ST			1	ADDRESS			Ì		
	HIALEAH FL 3301				1					
CITY-ST-ZIP TITLE	V	<b></b>	DELETE	1.4 CITY - 1 2.1 TITLE	51 - ZIP		Cha	ange Addition		
NAME	ESTEVE, HUMBE	สาน		2 2 NAME	1					
STREET ADDRESS 901 PONCE DE LEON BLVD. STE 304			}		ADDRESS					
CITY-ST-ZIP	CORAL GABLES		•	2 4 C/TY-	ļ					
TITLE	TS		☐ DELETE	3.1 TITLE		Secretary	Cha	ange Addition		
NAME	IGLESIAS, ZELMA	,		3.2 NAME	-	J. C.		-		
STREET ADDRESS	2457 COLLINS AV			3.3 S18(E)	ADDRESS					
CITY-ST-ZIP	MIAMI BCH. FL 3	3140		3.4. CITY-	}			_ ]		
TITLE			DELETE	4 1 TITLE		PRISTIDENT	Cha	ange Addition		
NAME				4. 2 NAME		MANUEL I. VilaRiño		' <b>'</b>		
STREET ADDRESS				4.3 STREE		3895 SW 8 ST ,		ľ		
CITY-ST-ZIP				4.4 CITY-5		Miami FL 33134				
TITLE			DELE 1E	5.1 TOTLE			☐ Cha	ange Addition		
NAME				5.2 NAME	ļ			ļ		
STREET ADDRESS				5 3 STREET	ADDRESS			1		
CITY-ST-ZIP				5.4 C(1Y - S	ST-ZIP					
TITLE			□ DELE1£	6.1 T(1)LE			Cha	angé 🔲 Addition		
NAME				6.2 NAME						
STREET ADDRESS				6 3 STREET	ADDRESS					
CITY-ST-ZIP			ħ	6.4 CITY-5	ST-ZIP			{		
14. I do heret	by certify that the inform indicated on this an	mation supplied with th	is ring does not qual	ify for the exe	mption sta	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same lega port as required by Chapter 607, Florida S	s. I further certify	that the		
I am an of	fficer or director of the	comporation of the r	or trustee empoy	vered to exac	ute this re	port as required by Chapter 607, Florida S	tatutes; and that	my name		