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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

POCUMENT # P95000091631 (8)

1. Corporation	DNWOOD APARTMENT COI	RPORATION			I REGULER DIA MANAFATAN BENTA ERINA BE	
Principal Place of Business Mailing Address					אם ונוגסם גוונס גווגים ופגסי פנו ושפיוסטו ג	ANY BONYE HAMBI ULDUB BULGE ULIAN ULDU YOOK
951 NE 167TH STREET STE 102 951 NE 167TH STREET STE 102 NO. MIAMI BEACH FL 33162 NO. MIAMI BEACH FL 33162				DO NOT WRITE	IN THE SPACE	
į					3. Date Incorporated or Qualified	IN THIS SPACE
ĺ					12/01/1995	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
21		26		65-0631031	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27			5. Oddinoute of olders bosined	Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	<u></u>		8. This corporation owes or has paid the current year Intangible	
24	25 29 9. Name and Address of Current Registered Agent		30	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent		
DE	· · · · · · · · · · · · · · · · · · ·	ut nagisteran Agent	81	Name	10. Name and Address of New No	Alerenan Wastr
	en-Ezra, marc 11 ne 167th street ste 102		L			
NO. MIAMI BEACH FL 33162			82	! Street Addr	ess (P.O. Box Number is Not Acceptab	die)
NO. MANIN DENOTTE SOTOZ			83	-		
			84	City		85 Zip Code
				1		FL
11. Pursuant	to the provisions of Sections 607.05	02 and 607,1508, Florida Statu	tes, the above	e-named corp	oration submits this statement for the pion's board of directors. I hereby acception's	ourpose of changing its registered
agent I a	am familiar with, and accept the oblig	gations of, Section 607.0505, Fi	orida Statute	s.	ions board of directors. Thereby deeps	1/6/
SIGNATURE	Signature, typed or printed before of registered as) + RA			ed when reinstating)	> /8/78
12.		ND DIRECTORS	13.	ent signatule requi	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE			1.1 TITLE			Change Addition
NAME	BEN-EZRA, ISAAC		1.2 NAME	1	_	1
STREET ADDRESS	1117A NE 163RD STREET		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	NO. MIAMI BEACH FL 33162		1.4 CiTY-	ST - ZIP		
TITLE	VD	☐ DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME	BEN-EZRA, MARC					
STREET ADDRESS	951 NE 167TH STREET NO. MIAMI BEACH FL 33162	,		T ADDRESS		
CITY-ST-ZIP TITLE	SD SD	Z DELETE	2 4 CITY- 3.1 TITLE	ST-ZIP		Change Addition
NAME	BEN-EZRA, MARC		3.2 NAME			
STREET ADDRESS	951 NE 167 STREET		8	T ADDRESS		
CITY-ST-ZIP	N. MIAMI BEACH FL		3 4. CITY-	S1-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		ļ
CITY-ST-ZIP		Decime	4.4 CITY-	ST-ZIP		Charte Admin
TITLE		☐ DELETE	5.1 TITLE	(☐ Change ☐ Addition
NAME CTOPET ADDOCCE	.		5.2 NAME			
STREET ADDRESS			5.3 STREE 5.4 CITY -	T ADDRESS		ļ
CITY-ST-ZIP TITLE			6.1 TITLE	91- YIL		Change Addition
1		- · · ·		ı		
NAME			6.2 NAME			· ·

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 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.

SIGNATURE: SAPPLE

2/35 aux

5/8/58

FILED

May 19 1998 8:00am

Secretary of State