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

PROFIT CORPORATION ANNUAL REPORT

1998

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

FILED

May 07 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000096135 (5)

HILLCREST COMMUNITIES CORPORATION I

Principal Place of Business Mailing Address 7661 S.W. 146TH STREET 7661 S.W. 146TH STREET MIAMI FL 33158 MIAMI FL 33158 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/20/1995 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0627680 Not Applicable Suite, Apt. #, etc. Suite Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution  $\Box$ Added to Fees 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Bi Name GONZALEZ, JULIO J 7661 S.W. 146TH STREET 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33158** 83 84 City 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 office 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 against and Island applicable (NOTE flegistered Agent a gnature recjuired when reinstating) CR2E034 (10/97 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Addition DELETE Change TITLE **PSTD** 1.1 TITLE VSTD GONZALEZ, JULIO J NAME 1.2 NAME 7661 SW 146TH ST STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - 7IP DELETE TITLE PD 2.1 TITLE ☐ Change Addition GOMEZ, OSCAR F NAME 2.2 NAME 12601 SW 146 ST STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 City - St - ZiP DELETE Change ■ Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZiP 3.4. CITY-ST-ZIP DELETE Change 4.1 TITLE Addition TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. Thereby certify that the information supplied with this filling 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 suppliemental 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 or an attachment with an address.

SIGNATURE:

6.4 CITY-ST-ZIP