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 **FILED**

Jun 18 1998 8:00am

Secretary of State

1. Corporation	US APARTMENTS I, INC.	0001556 (5)				
Principal Place of Business Mailing Address					a isensibbo ich enich dirit baise dalisi dalisi dalisi	10181 11001 01101 04110 0111 1001
6855 BYRON AVE		429 NORTH HIBISCUS [R			
MIAMI FL 33141 US		MIAMI BEACH FL 33139 US		DO NOT WRITE IN TH	IIS SPACE	
0.5		03			3. Date Incorporated or Qualified	IIO OF AOL
					01/05/1996	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21					65-0642218	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		6. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Gountry	Zip	p Country		8. This corporation owes or has paid the	
24	25 29		30		Personal Property Tax due June 30. Yes No	
	Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registers	ed Agent
SE	RRET, MILTON		81	Namo		
350-75TH STREET			82	Street Add	ress (P.O. Box Number is Not Acceptable)	
MIAMI BEACH FL 33141						
ļ			83			
			84	City		. 85 Zip Code
44 0					<u> </u>	·L `
agent La	to the provisions of sections of Actions for Action regi ster ed agent, or both, in the State an f am iliar with, and accept the oblig	e of Florida, Such change was attens of, Section 607.0505, F	authorized by lorida Statutes	-named corp the corpora -	poration submits this statement for the purposition's board of directors. I hereby accept the a	or changing its registered appointment as registered
SIGNATURE	Signature, typed or printed name of required tags	ent and the Kapolicubile (NC	It Registered Ager	il signature requi	red when reinstating) DA16	
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	PD	DELETE 1.1 TH				Change Addition
NAME			1.2 NAME			
STREET ADDRESS	% 350-75TH STREET		1.3 STREET ADDRESS			
CITY-ST-ZIP			1.4 CITY-ST	- ZIP		
TITLE	SVD	DELFTE	2.1 TITLE	-		☐ Change ☐ Addition
NAME	SERRET, NILDA		2.2 NAME			
STREET ADDRESS	10 000 10111 0111001		23 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33141		2. 4 CITY - S	1 - 7HP		
TITLE		☐ DEL€1E	3 1 TITLE			Change Addition
NAME			3.2 NAME 3.3 STHEET ADDRESS			
STREET ADDRESS						
CITY-ST-ZIP		34. C		1 - ZIP		Chance L Addition
TITLE NAME		L_J UCITIE	4 1 117LE 4 2 NAME			Change Addition
STREET ADDRESS			4.3 STREET /	1000100		
CITY-ST-ZIP						
TITLE		DELETE	4.4 CITY - ST 5.1 TITLE	- 2ff'		☐ Change ☐ Addition
NAME			5.2 NAME			E ounder E voution
STREET ADDRESS			5.3 STREET /	IDDBESS		
CITY-ST-ZIP	l l		5.4 CITY - S1	1		
TITLE			6.1 TITLE	¢ iii		Change Addition
NAME			6.2 NAME			
STREET ADDRESS	The state of the s		6.3 STREEL	LOORESS		

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 shiftmake he 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 affactment with an address.