## 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

## DOCUMENT # P96000008962 (8)

THE PR	OP HOUSE, INC.							: 		
Principal Place	of Business	Mailing Address				-				
4800 OLD WINTER GARDEN ROAD, UNIT 306 4018 BRAESGATE LANE										
ORLANDO FL		TAMPA FL 33624	****						_	
ı						$\vdash$	DO NOT WRITE IN T	HIS SPAC	<u> </u>	
						3.	Date Incorporated or Qualified 01/29/1996			
2. Principal Pla	ce of Business	2a. Mailing Address				1	. FEI Number		IAE	plied For
21	oo o caameas	26				"	59-3358390	ı		t Applicable
Suite, Apt. #	. etc	Suite, Apt. #, etc.				+		SE		dditional
22		27				5.	. Certificate of Status Desired		Fee Re	
City & State		City & State				6.	, Election Campaign Financing	S	5.00	May Be
23		28					Trust Fund Contribution		Added t	
Zıp	Country	Zφ	Coun	itry		8.	. This corporation owes or has paid the			
24	25	29	30			⅃	Personal Property Tax due June 30.	☐ Yet		] No
<del> </del>	9. Name and Address of Curre	nt Røgistered Agent				10.	Name and Address of New Registe	red Agen	<u>t                                     </u>	
SPIE	GEL & UTRERA P.A.		- [4	B1	Name					
343 ALMERIA AVENUE			la la	82 Street Addre			P.O. Box Number is Not Acceptable)			
CORAL GABLES FL 33134				<u>-</u>  -						
			- [1	83						
			1	84	City			. 85	Zip (	ode
								FL   65	<u>Ļ</u>	<del>,</del>
11. Pursuant to office or reg	the provisions of Sections 607.05 gistered agent, or both, in the Stati familiar with And accept the oblid	02 and 607.1508, Florida St e of Florida: Such change w nations of Section 607.0505	atules, the aboves authorized b. Florida Statu	ove by ites	the corporat	ion's	on submits this statement for the purpo board of directors. I hereby accept the	se of char appointm	iging its	s registered registered
01011471105	111111111111111111111111111111111111111	57 NHEN T-		-72	26_0A	r	1-DFA/V	<del>-7/2</del>	<del>/98</del>	٧
SIGNATURE	unature, typed or printed frame disjultered ac		(NOTE Rugislered	Ager	nt signature require	ed whe	in reinstating) DA	ITE	, , ,	
12.	OFFICERS AN	ID DIRECTORS	13.				ADDITIONS/CHANGES TO OFFICERS			
TITLE	PD	☐ DELETE	1,1 TITL	.E					change	■ Addition
NAME	ERDBERG, STEPHEN I		1.2 NAA	AE.	ĺ					
STREET ADDRESS	4600 OLD WINTER GARDEN	ROAD, UNIT 306	1.3 STR	EET A	adore\$s			•		
CITY - ST - ZIP	ORLANDO FL 32811		1.4 CIT	Y-ST	1- ZIP		- ,			
TITLE	SD	☐ DELETE	2.1 1111	2.1 TITLE					Change	☐ Addition
NAME	THORESEN, KURT R		22 NAM	22 NAME			شاهر المالية	<del>,</del>		
STREET ADDRESS	4800 OLD WINTER GARDEN	ROAD, UNIT 306	23 STR	EET A	ADDRESS					
CITY-ST-ZIP	ORLANDO FL 32811			2. 4 CITY-ST-ZIP						
TITLE		☐ DELETE 3.		1 TITLE				□ c	hange	☐ Addition
NAME			3.2 NAA	ИE						
STREET ADDRESS			3.3 STR	EET A	ADDRESS					
CITY-ST-ZIP			3.4. CIT	Y-51	T-ZIP					
TITLE		☐ DELETE	4.1 TITL	.E					hange	Addition
NAME			4. 2 NAJ	ME						

CITY-ST-ZIP 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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 changing or on an attaching it with my address

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

51 TITLE

52 NAME

6.1 TITLE

6.2 NAME

DELETÉ

DELETE

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME STREET ADDRESS

I. ERDBERG

**FILED** 

Mar 06 1998 8:00am

Secretary of State

Change

Addition

☐ Addition