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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 08 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P9600038788 (1)

CASABLANCA REAL ESTATE SERVICES, INC.

Principal Place of Business	Mailing Address			
6345 COLLINS AVE.	6345 COLLINS AVE.			
SUITE CU 7 MIAMI BEACH FL 33141	SUITE CU 7 MIAMI BEACH FL 33141-4614	1		
MINH DENOTITE SSTAT	MINIMI DENOTE LE SOTATAGE	•	3. Date Incorporated or Qualified 3a. 05/06/1996	Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEL Number 06 75570	Applied For
Suite Apt. #. etc.	26			Not Applicable \$8.75 Additional
22	27		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip Country	28 Zip	Country	Trust Fund Contribution	Added to Fees
24 25	29 3		8. This corporation has liability for intangit Florida Statutes Yes	Die lax under s. 199.032,
g, Name and Address of Cu			10. Name and Address of New Registers	
SANCHEZ-MEDINA, ROLAND JR.	- Mallac S			
701 BRICKELL AVE		82 Street Addr	ress (P.O: Box Number is Not Acceptable)	
SUITE 3900		635	IS COLLINS AVE	,
. MAMI FL 33131		83	,	
		84 City	rui Detch F	L 85 3694/
11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in this Sagent. Lam familiar with and accept the office.	0502 and 607.1508, Florida Statutes	the above-named corp	poration submits this statement for the purpose	of changing its registered
agent. I am familiar with and recept the of	Signations of Section 607.0505, Florid	da Statute	iona board of directors. Thereby accept the a	promitient as registered
SIGNATURE	)1/ //wat	-GM		///
	Sager and title ( opinicable (NOTE: F AND DIRECTORS	Registered Agent signature require 13.	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS A	IND DIDECTORS IN 40
THE OTTOCHS	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
NAME	<del></del>	12 NAME	school of Relien	~
STREET ADDRESS		1.3 STREET ADDRESS	345 COMINS Aut	>/
City- St. ZiF		1.4 CITY-ST-ZIP	Mitwi Fresch	W 33/4/
TITLE	DELETE	21 TITLE		Change Addition
NAME		22 NAME †		ŀ
STREET ADORESS		23 STREET ADDRESS		
C(TY+ ST-2IF		2 4 CITY-ST-ZIP		
TITLE	DELETE	31 TITLE		Change Addition
NAME		3 2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		
C(TY-ST-ZIP	TT NO FYC	3.4, CfTY-ST-ZiP		<b>1</b> (100
TIME	☐ DELETE	4.1 TITLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		_
CITY-ST-ZIP TITLE	DELETE	4.4 CHTY+ST+ZIP 5.1 TITLE		Change Addition
NAME	E DULLIE			Z Z AGGILLOR
		5.2 NAME	JK.	N/97
STREET ACCIDESS  CITY-ST-ZIP		5.3 STREET ADDRESS	$\mathcal{U}$	7017
THE	DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME	territor of the contract of	6.2 NAME	8000021852 -05/20/97010771	:38
STREET ADDRESS		6.3 STREET ADDRESS	-05/20/97010774	009
C.T. CT 70		A A DITCL OF THE	***165.00	

14. I do hereby 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 pane appears in Block 12 or Block 13 if changed, or on an attachment with an address.