

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

FILED
Apr 14 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra S. Morham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P96000051141 (5)

1. Corporation Name
STUART PROPERTIES GROUP, INC.



Principal Place of Business: **STE. 500, 2875 NE 191ST ST. AVENTURA FL 33180**
 Mailing Address: **STE. 500, 2875 NE 191ST ST. AVENTURA FL 33180-2832**

3. Date Incorporated or Qualified: **06/14/1996** 3a. Date of Last Report

4. FEI Number: **65-0691489** Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business

21. State, Apt. #, etc.

22. City & State

23. Zip Country

24. 25. 29. 30. Country

2a. Mailing Address

26. State, Apt. #, etc.

27. City & State

28. Zip Country

9. Name and Address of Current Registered Agent
FILINGS, INC.
3732 NW 16TH ST.
FT. LAUDERDALE FL 33311

10. Name and Address of New Registered Agent

81. Name: **KERRY E. ROSENTHAL**

82. Street Address (P.O. Box Number is Not Acceptable): **2875 N.E. 191 Street**

83. Suite 500

84. City: **Aventura** FL 85. Zip Code: **33180**

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:  DATE: **2/12/97**

Signature required for printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE: DELETE

NAME: **ROSENTHAL, KERRY E**

STREET ADDRESS: **STE. 500, 2875 NE 191ST ST.**

CITY- ST- ZIP: **AVENTURA FL 33180**

TITLE: DELETE

NAME:

STREET ADDRESS:

CITY- ST- ZIP:

TITLE: DELETE

NAME:

STREET ADDRESS:

CITY- ST- ZIP:

TITLE: DELETE

NAME:

STREET ADDRESS:

CITY- ST- ZIP:

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: Change Addition

1.2 NAME:

1.3 STREET ADDRESS:

1.4 CITY- ST- ZIP:

2.1 TITLE: Change Addition

2.2 NAME:

2.3 STREET ADDRESS:

2.4 CITY- ST- ZIP:

3.1 TITLE: Change Addition

3.2 NAME:

3.3 STREET ADDRESS:

3.4 CITY- ST- ZIP:

4.1 TITLE: Change Addition

4.2 NAME:

4.3 STREET ADDRESS:

4.4 CITY- ST- ZIP:

5.1 TITLE: Change Addition

5.2 NAME:

5.3 STREET ADDRESS:

5.4 CITY- ST- ZIP:

6.1 TITLE: Change Addition

6.2 NAME:

6.3 STREET ADDRESS:

6.4 CITY- ST- ZIP:

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, 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:  DATE: **2/12/97** DAYTIME PHONE #: **305-937-0380**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)