

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 23, 1999 8:00 am
Secretary of State

02-23-1999 90001 028 ***150.00

DOCUMENT # P96000053770

1. Corporation Name
MIDPORT LAND GROUP, INC.

Principal Place of Business
6710 MAIN ST
SUITE 233
MIAMI LAKES FL 33014
US

Mailing Address
6710 MAIN ST
SUITE 233
MIAMI LAKES FL 33014
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/24/1996

4. FEI Number

65-0681821

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 owes the current year Intangible
Personal Property Tax.

Yes No

9. Name and Address of Current Registered Agent

MACNAIR, CHRISTOPHER J.
7237 SW 53 AVE
SUITE 250
MIAMI FL 33143

10. Name and Address of New Registered Agent

81 Name Mac Nair, Christopher J.
82 Street Address (P.O. Box Number is Not Acceptable)
6710 Main Street, Suite 233
83
84 City Miami Lakes FL 85 Zip Code 33144

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

Christopher J. Mac Nair, Vice President

DATE

1/6/99

Signature typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	MACNAIR, CHRIS J	
STREET ADDRESS	7237 S.W. 53RD AVENUE	
CITY-ST-ZIP	MIAMI FL 33143	
TITLE	P	DELETE
NAME	FENIG, JAY	
STREET ADDRESS	2661 EDGEWATER DR	
CITY-ST-ZIP	WESTON FL 33332	
TITLE	VS	DELETE
NAME	KUPPERMAN, SCOTT A.	
STREET ADDRESS	210 SEAVIEW DR, #511	
CITY-ST-ZIP	KEY BISCAYNE FL 33149	
TITLE	V	DELETE
NAME	DALSO, CHRISTOPHER	
STREET ADDRESS	3500 SW THISTLEWOOD LANE	
CITY-ST-ZIP	PALM CITY FL 34990	
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 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 name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE Scott Kupperman

Date

1/6/99

Daytime Phone #

305-512-8001

CR2E034 (11/98)