

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 24, 1999 8:00 am
Secretary of State

02-24-1999 90030 014 ***158.75

DOCUMENT # P96000073114

1. Corporation Name

MUTINY PROPERTIES, INC.



Principal Place of Business

8255 SW 152 AVENUE
101
MIAMI FL 33193
US

Mailing Address

8255 SW 152 AVENUE
101
MIAMI FL 33193
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/30/1996

4. FEI Number

65-0739574

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

2. Principal Place of Business

1570 MADRUGA AVE

2a. Mailing Address

1570 MADRUGA AVE

Suite, Apt. #, etc.

200

Suite, Apt. #, etc.

200

City & State

CORAL GABLES FL

City & State

CORAL GABLES FL

Zip

33146

Country

USA

Zip

33146

Country

USA

9. Name and Address of Current Registered Agent

PARAJON, LUIS
8255 SW 152 AVENUE
101
MIAMI FL 33193

10. Name and Address of New Registered Agent

81 Name
LUIS PARAJON

82 Street Address (P.O. Box Number is Not Acceptable)
1570 MADRUGA AVE

83 #200

84 City
CORAL GABLES

FL

85 Zip
33146

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME PARAJON, LUIS
STREET ADDRESS 8255 SW 152 AVENUE
CITY-ST-ZIP MIAMI FL 33193

TITLE ST
NAME DOWNING, BERTHA
STREET ADDRESS 8255 SW 152 AVENUE
CITY-ST-ZIP MIAMI FL 33193

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS 1570 MADRUGA AVENUE, #200
1.4 CITY-ST-ZIP CORAL GABLES, FL 33146

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS 1570 MADRUGA AVENUE, #200
2.4 CITY-ST-ZIP CORAL GABLES, FL 33146

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Paytime Phone #

CR2E034 (11/98)

0218953