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 # P96000076315 (6)

DAVIE APARTMENTS CORPORATION

Country

Principal Place of Business
C/O DAVID MORROW
3333 WEST DAVIE BOULEVARD
FT. LAUDERDALE FL 33312

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

Zip

21

22

24

Mailing Address

2a. Mailing Address

City & State

Zıp

Suite, Apt. #, etc.

26

29

C/O DAVID MORROW 3333 WEST DAVIE BOULEVARD FT. LAUDERDALE FL 33312

FILED May 01 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

Yes

8. This corporation owes or has paid the current year Intangible

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

□ No

Not Applicable

 Date Incorporated or Qualified 09/13/1996

65-0696572

5. Certificate of Status Desired

6. Election Campaign Financing

Personal Property Tax due June 30.

Trust Fund Contribution

4. FEI Number

| g, Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | | | |
|--|---------------------------------------|----------|--------------------|---|--|-------------|----------------|--|
| ROBERTS, ROBERT T ESQUIRE 50 WEST MASHTA DRIVE SUITE 2 | | | 81 | Name | • | | | |
| | | | 82 | Street | Street Address (P.O. Box Number is Not Acceptable) | | | |
| | | | | os official radioss (1.0. pox ramper is not receptable) | | | | |
| KEY BISCAYNE FL 33149 | | | 83 | | | | | |
| | | | 84 | City | | Tee 2 | in Code | |
| | | | ** | City | FL | 85 2 | ip Code | |
| 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, typad or printed name of registered agent and tilknill applicable (NOTE Registered Agent signature required when reinstating) DATE | | | | | | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | rit signatul | ADDITIONS/CHANGES TO OFFICERS AND | DIRECT | ORS IN 12 | |
| TITLE | D D D D D D D D D D D D D D D D D D D | DELETE | 1,1 TITLE | | T ADDITIONS/GRANGES TO GITTOERS AND | Chan | | |
| NAME | MEHR, YORAM | | 1.2 NAME | | | | | |
| STREET ADDRESS | 14 KARO STREET | | 1.3 STREET ADDRESS | | | | | |
| CITY - ST - ZIP | TEL-AVIV OC 67014 | | 1.4 CITY-ST-ZIP | | | | | |
| TITLE | D DELETE | | 2.1 TITLE | | | Chan | e Addition | |
| NAME | FEIT, ISRAEL | | 2.2 NAME | | | | | |
| STREET ADDRESS | 14 KARO STREET TEL-AVIV OC 67014 | | 2.3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | | | 2 4 CITY-5 | ST - 71P | | | 1 | |
| TITLE | DELETE | | 3.1 TITLE | | | Chang | ge Addition | |
| NAME | · | | 3.2 NAME | | | | | |
| STREET ADDRESS | | | 3 3 STREET ADDRESS | | | | | |
| CITY-ST-ZIP | <u>-</u> | 1 | 3.4. CITY-5 | 61 - ZIP | | | | |
| TITLE | | DELETE | 4.1 TITLE | | | Chang | ge Addition | |
| NAME | | | 4.2 NAME | | | | i | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | | | i | |
| CITY - ST - ZIP | | | 4.4 CITY - S | 1-ZIP | <u> </u> | | | |
| TITLE | | DELÉTE | 5.1 TITLE | | | Chan | e Addition | |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 CITY-S | T- 2 IP | | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | Chang | pe [] Addition | |
| NAME | | | 6.2 NAME | | | | 1 | |
| STREET ADDRESS | | | 6.3 STREET | address | | | | |
| CITY-ST-ZIP | | 1 | 6.4 CITY-S | | | | | |
| 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. | | | | | | | | |

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