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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000087645 (3)

EQUITY ONE (MONUMENT) INC.

FILED Mar 26 1997 8:00am Secretary of State



Principal Place of Business 777 17TH STREET PENTHOUSE MIAMI BEACH FL 33139		777 17TH STREE	Mailing Address 777 17TH STREET PENTHOUSE MIAMI BEACH FL 33139-1854				
					3. Date Incorporated or Qualified 10/15/1996	3a. Date of La	ast Report
2. Principal I	Place of Business	2a. Mailing Addr	ress		4. FEI Number		Applied For
21		26			65-0704444		Not Applicable
Suite, Apt 22	. #, etc	Suite, Apt. #,	, etc.	~~~	5. Certificate of Status Desired	Fe Fe	75 Additional e Required
City & Sta	de	City & State			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zip	Coun	itry	a. This corporation has liability for		der s. 199.032,
24	25	29	30			Yes No	
	g. Name and Address of Cui	rrent Hegistered Agent		81 Name	10. Name and Address of New Re	egistered Agent	
	RCUS, ALAN J ESO			INATIRE			
20803 BISCAYNE BOULEVARD SUITE 301			Į.	82 Street Address (P.O. Box Number is Not Acceptable)			
	RTH MIAMI BEACH FL 33180		<u> </u>	B3			
• 110	NITH MIAMI DEACH PL 35100						
*			Ī	34 City		FL 85	Zip Code
11. Pursuant	to the provisions of Sections 607	0502 and 607 1508. Flori	da Statutes, the ab	ove-named co	orporation submits this statement for the ration's board of directors. I hereby acce		ing its registered
SIGNATURE	Signature, typed or pointed name of registered	d agent and title if applicable. AND DIRECTORS	(NOTÉ: Registered	Agent signature rec	quired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIREC	CTORS IN 12
	Signature, typed or pointed name of registered	AND DIRECTORS					
12.	Signature, typed or pooled name of registerer OFFICERS	AND DIRECTORS	13.	E		CERS AND DIREC	
12. TITLE	OFFICERS P KATZMAN, CHAIM	AND DIRECTORS	13. ELETE 1.1 TITI 1.2 NAP	E		CERS AND DIREC	
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The manage series that the anomalian supplied with this upper for quality for the exemption stated in section 119.07(3), Florida Statutes. I further certify that the information indicated on this annual teport or supplemental annual teport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corresponding or the focetyer 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 chapter 607, and an attriction without supplemental without supplemental true that the supplemental interests are considered by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 12 or Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears in Block 13 if chapter 607, and that my name appears i

SIGNATURE:

OFFICER OR DIRECTOR

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