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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 18 1998 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

	MENT # P96000 VESTMENT PROPERTIES, II	- '	)		
Principal Place	e of Business	Mailing Address			191 (1901 91891 1910 1994 1991
6971 N FEDERAL HIGHWAY SUITE 105 BOCA RATON FL 33487		6971 N FEDERAL HIGHWAY SUITE 105 BOCA RATON FL 33487		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				· ·	
2. Principal Pl	ace of Business	2a, Mailing Address		11/04/1996 4. FEI Number	Applied For
श्री		26		65-0708004	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		3. Certificate of Status Dosileo	Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>28</b> Zip	Country	Trust Fund Contribution	Added to Fees
24) Zip	25	29	30	<ol> <li>This corporation owes or has paid the cu Personal Property Tax due June 30.</li> </ol>	irrent year Intangible  X Yes
<u> </u>	9. Name and Address of Current		30	10. Name and Address of New Registered	<b>7-3</b>
GDI	ENWALD, STEVEN I ESQ.		81 Name		
6971 N FEDERAL HIGHWAY			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SUITE 105			July Street Addi	ess (r.o. box number is not Acceptable)	
	CA RATON FL 33487		83		
			84 City		85 Zip Code
			/	<u>FL</u>	_   _
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.					
agent. I ar	m familiar with, and accept the obliga	tions of, Section 607.0505, F	lorida Statutes	iona board or directord. The object of deposit the ap	John Marie Marie Paris Control
SIGNATURE					~~~
12.	Signature, typed or printed name of registering agen OF LICERS AND		It: Registered Agent signature require  13.	ed when reinstating) DATE  ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	D	DELETE	1.1 THTLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
NAME	LAVENDER, JANICE		1.2 NAME		
STREET ADDRESS	6971 N FEDERAL HIGHWAY		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33487		1,4 CITY-S1-2IP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	LOWE, CARLETON A		2.2 NAME		
STREET ADDRESS	6971 N FEDERAL HIGHWAY		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33487		2. 4 CITY-ST-ZIP		
TITLE		☐ Oftete	3.1 TITLE		Li Change Li Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	3 4. CITY - ST - ZIP 4.1 TITLE		Change Addition
TITLE NAME		F I treese	4. 2 NAME		E Anange El vocation
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-2IP			4.4 CITY-S1-ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		·
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	_		5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-7IP		
indicated of officer or d	on this annual report or supplemental	annual report is true and ac ver or trustee empowered to	curate and that my signatur	Section 119.07(3)(i), Florida Statutes. I further or e shall have the same legal effect as if made un pired by Chapter 607, Florida Statutes; and that	nder oath; that I am an