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

P96000102362 (6)

FILED Apr 13 1998 8:00am Secretary of State

PAWLIGER OPERATING PROPERTIES, INC.									
Principal Place of Business Mailing Address						- I TO BETTART THA TOTAL BASEL OF 151 AND 11011 BE	HI 6 HT 6 6 HJ 17		
6838 NW 77TH COURT 6838 NW 77TH COURT			г						
MIAMI FL 33166 MIAMI FL 33166			•			DO NOT WRITE IN THIS	S SPACE		
						3. Date Incorporated or Qualified	JOIAGE		
						12/19/1996		.	
2. Principal Place of Business 2a. Mailing Ad			ddress			4. FEI Number Applied For			
21		26				65-0715797	Not Applicable		
Suite, Apt.	#, etc.	1	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	Additional	
City & State		City & State	City & State					beniupeF	
23 City & State	3	28	¬ ' ""			6. Election Campaign Financing Trust Fund Contribution		May Be	
Zip Country Zip			Cou	Country		8. This corporation owes or has paid the c			
24	25	29]	30	•		Personal Property Tax due June 30.		□ No	
	9. Name and Address of Curre	nt Registered Agent		81		10. Name and Address of New Registere	d Agent		
WIENER, MARVIN J					Name				
2121 PONCE DE LEON BLVD. STE 900 CORAL GABLES FL 33134				82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
				83					
				"					
				84	City	F	85 Zir	Code	
								its registered	
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 present name of registered as			d Agen	t signature require	ed when reinstating) DATE	in Pilesses	20011145	
12.	OFFICERS AN	ND DIRECTORS DELETE	13.	T) E	Т	ADDITIONS/CHANGES TO OFFICERS AI	ND DIRECTO		
NAME	DANK IAPP ANALYS						ш спатус	, L Mudicipil	
STREET ADORESS				1.2 NAME 1.3 STREET ADDRESS				ļ	
CITY-ST-ZIP	MIAMI FL 33166		1	1.4 City-St-ZiP]	
TITLE	DELETE 21					Change	Addition		
NAME	23		22 N	AME					
STREET ADDRESS			2 3 STR		ADDRESS				
CITY-ST-ZIP				2.4 CITY-ST-ZIP					
TITLE		☐ DELE1E	*** ****				☐ Change	e ∐ Addition	
NAME OTHER ADDRESS				IAME				l	
STREET ADDRESS CITY_ST_7IP			3.3 STREET ADDRESS 3.4. CITY-ST-ZIP						
CITY-ST-ZIP TITLE			RILY-SI RTLE	1-417		Change	Addition		
NAME				NAME					
STREET ADDRESS					ADORESS				
CITY-ST-ZIP				ITY-ST	1			1	
TITLE		☐ DELETE	5.1 T		1		☐ Change	Addition	
NAME			5.2 N	IAME					
STREET ADDRESS			5.3 \$	TREET #	ADDRESS	•			
CITY-ST-ZIP				ITY-ST	- ZIP				
TITLE		☐ DELETE	6.1 1				☐ Change	Addition	
NAME			6.2 N						
STREET ADDRESS			1		ADDRESS				
CfTY-ST-ZIP	certify that the information supplied	with this filing does not qualif		empti		Section 119.07(3)(i), Florida Statutes. I further	certify that the	ne information	
indicated	on this annual report or supplement	lal appropriate to a and	COMPAN OF	of the	t my signatur	re shall have the same lenal effect as if made	under oath	that I am an	

value and triat my signature shall have the same legal effect as if made under oath; that I am a xecute this report as required by Chapter 607, Florida Statutes; and that my name appears in MCHRAA PAUGER. indicated on this annual report or supplemental an officer or director of the corporation or the receiver Block 12 or Block 13 if changed, or on an attach in

SIGNATURE: