RECEIVED: 7- 9-99; 2:59PM; => NOGA BUILDERS INC; #3

JUL-09-1999 14:56 FROM LAW OFFICES TO 3058213376 P.03

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
99 JUL 12 AM 10:23
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P97000008965

1. Corporation Name

MELROSE TOWNHOMES, INC.

Principal Place of Business	Mailing Address
901 PONCE DE LEON BLVD SUITE 701 CORAL GABLES, FL 33134	901 PONCE DE LEON BLVD SUITE 701 CORAL GABLES, FL 33134

3. Date Incorporated or Qualified: 01/29/1997
3a. Date of Last Report: 3/19/1998
4. FEI Number: 65-0734727 — ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired: X ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 2189 WEST 60 STREET	26 2189 WEST 60 STREET
Suite, Apt. #, etc. 22 SUITE 205	Suite, Apt. #, etc. 27 SUITE 205
City & State 23 HIALEAH, FLORIDA	City & State 28 HIALEAH, FLORIDA
Zip 24 33016 — Country 25 USA	Zip 29 33016 — Country 30 USA

9. Name and Address of Current Registered Agent

SEGREDO, FRANK J ESQ
901 PONCE DE LEON BLVD
SUITE 701
CORAL GABLES, FLORIDA 33134

10. Name and Address of New Registered Agent

31 Name: JOSE E. FANO
32 Street Address (P.O. Box Number is Not Acceptable): 2189 WEST 60 STREET
33 SUITE 205
34 City: FLORIDA — FL — 35 Zip Code: 33016

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 JOSE E. FANO 07/09/99
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	FANO, JOSE E.		1.2 NAME	
STREET ADDRESS	2189 WEST 60 STREET SUITE 205		1.3 STREET ADDRESS	
CITY-ST-ZIP	HIALEAH, FLORIDA 33016		1.4 CITY-ST-ZIP	
TITLE	D	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	FERRO, MARIO JR.		2.2 NAME	100010293147 1--2
STREET ADDRESS	9921 W. OKEECHOBEE ROAD, 126-A		2.3 STREET ADDRESS	-07/14/99--01032--005
CITY-ST-ZIP	HIALEAH, FL 33016		2.4 CITY-ST-ZIP	*****558.75
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 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-ZIP	

CR2E034 (9/96)

14. I do 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.

SIGNATURE: JOSE E. FANO VICE PRESIDENT 07/09/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date

7/12/99

TOTAL P.03