

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

FILED
Apr 08 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # **P97000017727 (3)**
1. Corporation Name

GENERAL PROPERTY SERVICES, INC.

Principal Place of Business

**4451 NE 22ND AVENUE
LIGHTHOUSE POINT FL 33064**

Mailing Address

**4451 NE 22ND AVENUE
LIGHTHOUSE POINT FL 33064**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/25/1997

4. FEI Number

65-0736610

Applied For

Not Applicable

5. Certificate of Status Desired ☒

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 3309 NW 16th Avenue Suite, Apt. #, etc.	26 3309 NW 16th Avenue Suite, Apt. #, etc.
22 City & State	27 City & State
23 Pompano Beach, FL Zip Country	28 Pompano Beach, FL Zip Country
24 33064 25 Broward	29 33064 30 Broward

9. Name and Address of Current Registered Agent

**FARBSTEIN, DAVID R ESQ
2765 W. CYPRESS CREEK ROAD
FT. LAUDERDALE FL 33309**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code

FL

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 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 <input checked="" type="checkbox"/> DELETE	1.1 TITLE	D/President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PETRILLO, ANTHONY	1.2 NAME	MIGUEL RODRIGUEZ
STREET ADDRESS	4451 NE 22ND AVENUE	1.3 STREET ADDRESS	3309 NW 16th Avenue
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064	1.4 CITY-ST-ZIP	Pompano Beach, FL 33064
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	MODESTO ECHEZARRETA
STREET ADDRESS		2.3 STREET ADDRESS	1740 S. Bayshore Lane
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami, FL 33133
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Secretary/Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	MARY RODRIGUEZ
STREET ADDRESS		3.3 STREET ADDRESS	3309 NW 16th Avenue
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Pompano Beach, FL 33064
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *Mary Rodriguez* **MARY RODRIGUEZ S/T** **4/2/98** **(954) 973-0332**

CR2E034 (10/97)