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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000024321

IMPROVEMENTS OF FORT LAUDERDALE PROPERTIES, INC.

| Principal Place | e of Business | Mailing Address | | 1 (68)(68) (12 (21)) (28)(28)() 88() 48)() 48)() 48)() 48) | |
|--------------------------------|--|----------------------------------|---------------------|---|-----|
| 3400 S. TAMIAMI TRAIL- *3400 S | | 43400 S. TAMIAMI TRAIL | | · | |
| SUITE 303 | | SUITE 303 | | DO NOT WRITE IN THIS SPACE | |
| SARASOTA FL 34239 | | SARASOTA FL 34239 | | 3. Date Incorporated or Qualifed | 1 |
| | | | | 03/18/1997 | ļ |
| 2 Principal Pl | lace of Business | 2a. Mailing Address | | 4. FEI Number . Applied For | 1 |
| <u> </u> | N.E. 56 Ct. | 26 1318 Lafai | alda CL | 65-0758043 Not Applicable | 1 |
| Suite, Apt. | | Suite, Apt. #, etc. | LTTC OF | - \$8.75 Additional | 1 |
| 22 | | 27 | | 5. Certificate of Status Desired Fee Required | |
| City & State | | City & State | | . 6. Election Campaign Financing \$5.00 May Be | |
| 23 Ft. La | uderdale | 28 Cape Coral | | Trust Fund Contribution Added to Fees | 4 |
| Zip | Country | Zip 1 | Country | 8. This corporation owes the current year Intangible | |
| 24 3330 | | 29 33904 30 | 1 1. | Personal Property Tax. Yes No 10. Name and Address of New Registered Agent | 1 |
| | 9. Name and Address of Current | Registered Agent | 81 Name | 10. Name and Address of New Registered Agent | 1 |
| JAEN | NSCH, P. CHRISTOPHER | | | HILL THOMAS W. | |
| 3400 S. TAMIAMI TRAIL | | | 82 Street | Address (P.O. Box Number is Not Acceptable) 13 18 LAFAY ETTE ST. | |
| SUITE 303 — | | | | 1318 CAFAGETTE ST. | ┨ |
| | | | | | |
| O-010 | no lova | er Reg. Agen | 84 City | CAPE CORAL FL 85 Zip Code 3.3904- | 1 |
| | VIO 10-09 | 6 1 - J . U | (ha shaya namad | | - |
| l office or re | egistered agent, or both, in the State of | Florida. Such change was auth | orized by the corbo | corporation submits this statement for the purpose of changing its registered pration's board of directors. I hereby accept the appointment as registered | |
| agent. I ar | m familiar with and accept the obligation | ons of Section 607.0505, Florida | a Statutes. | | |
| SIGNATURE | I MOMOSON DE | ZU (ALOYE: Bo | Thoma | equired when reinstating) DATE | |
| 12. | Signature, typed or printed name of registered agent a OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | 1 |
| TITLE | D | ☐ DELETE | 1.1 TITLE | Change Addition | 1 |
| NAME | QUADER, WOLFGANG | | 1.2 NAME | | |
| STREET ADDRESS | 3120 NE 56TH COURT | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP | FT. LAUDERDALE FL 33308 | | 1,4 CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 2.1 TITLE | D ☐ Change Addition | |
| NAME | | | 2.2 NAME | HILL, THOMAS W. | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | 1318 LAFAYETTE ST. | |
| CITY-ST-ZIP | | | | CAPE CORAL, FL 33904 | _ |
| 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 | 18. | 1 |
| 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 | 1 |
| 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. | - - |
| 1 | 1 | | 6.2 NAME | m have the | 1 |

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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP