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

DOCUMENT # P9700025412 (2)

CORAL TOWER APARTMENTS, INC.

FILED Apr 23 1998 8:00am Secretary of State



6.1							
Principal Place of Business Mailing Address							
8191-CORAL-WAY-8TE-1005 3191-CORAL-WAY-8TE-1005 MIAMI-FL-93145-							
MINISTER TE US	143	MIAMI FL 33145-			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
					03/20/1997		
	lace of Business	2a. Mailing Address	1 115	12	12 4. FEL Number A 7. / 1 2 / Applied For		
21 500	SW 24 Rb.	26 /· () / () OX	47	-150	43 65-0/4/234 Not Applicable		
Sulte, Apt		Suite, Apt. #, etc. •	7/		5. Certificate of Status Desired \$8.75 Additional		
22 KUA		27 MIAM	PI. S	334 A	Fee Required		
City & State	э ′	City & State	(6. Election Campaign Financing \$5.00 May Be		
23	28				Trust Fund Contribution Added to Fees		
Zip	Country Zip Country			У	This corporation owes or has paid the current year Intangible		
24 33/		29	30		Personal Property Tax due June 30. Yes No		
	g. Name and Address of Current	Registered Agent		1	10. Name and Address of New Registered Agent		
	DI ER NE, RAFAEL E		81	Name			
3191 CORAL WAY, STE. 1885				Street A	Address (P.O. Box Number is Not Acceptable)		
MI	MIAMI-FL 89145				500 SW BY Rd		
•			83	1			
			84	City	85 Zip Code		
				/	M/1M FL 93/25		
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statu	tes, the above	e-named c	corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered		
agent. I a	m familiar with, and accept the obligati	ons of, Section 607.0505, Fi	orida Statute	iy ine corpi is.	bration's board of directors. Thereby accept the appointment as registered		
SIGNATURE							
	Signature, typed or printed name of registered agent		E: Registered Ac	jent signature r	equired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DADIEDNE DAERE E	☐ DELETE	1.1 TITLE	i	PA ESI DENT SECRETARY Change Addition		
NAME	PADIERNE, RAFAEL E		1.2 NAME				
STREET ADDRESS	3191 CORAL WAY, STE. 1005		. 1.3 STREE	T ADDRESS	500 SW 24 Rd.		
CITY-ST-ZIP	MIAMI FL 33145		1.4 CHY-	ST-ZIP	MAN, FL. 36149		
TITLE	D	☐ DELETE	21 TITLE	·	500 sce) a v Rd.		
NAME	PADIERNE, MERCEDES C		2.2 NAME		3		
STREET ADDRESS	3191 CORAL WAY, STE. 1005		2 3 STAEE	t address	500 scu a v 10.		
CITY-ST-ZIP	MIAMI FL 33145		2. 4 CITY-	ST - ZIP	Nei Anii Fl. 33119		
TITLE		☐ DELETE	3.1 TITLE		Change Addition		
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP			3.4. CITY-	ST-2IP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition		
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREE	1 ADDRESS			
CITY-ST-ZIP			4.4 CITY -	ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition		
NAME			5.2 NAME	ľ			
STREET ADDRESS			5.3 STREE	T ADDRESS			
CITY-ST-ZIP			5.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	T ADDRESS			
CITY-ST-ZIP			6.4 CiTY-				
14. I hereby c	ertify that the information supplied with	this filing does not qualify for	or the exemp	otion stated	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information		
Indicated of officer or of	on this annual report or supplemental director of the corporation or the receive	inhual report is true and ecr of or trustee empowered to	urate and the	at my sign report as r	ature shall have the same legal effect as if made under oath; that I am an required by Chapter 607, Florida Statutes; and that my name appears in		