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FILED

Apr 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000039165 (0)

1. Corporation Name

MAMK PROPERTIES, INC.

Principal Place of Business

5601 BISCAYNE BLVD
MIAMI FL 33137

Mailing Address

5601 BISCAYNE BLVD
MIAMI FL 33137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/30/1997

4. FEI Number

65-0775554

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

21 62 N.E. 90th Street

Suite, Apt. #, etc.

22

City & State

23 EL Portal, Florida

Zip

24 33138

Country

25 USA

2a. Mailing Address

26 P.O. BOX 680249

Suite, Apt. #, etc.

27

City & State

28 North Miami, FL

Zip

29 33138

Country

30 USA

9. Name and Address of Current Registered Agent

ROSEN, STEVEN M
5601 BISCAYNE BLVD
MIAMI FL 33137

81 Name

Wary Everett

82 Street Address (P.O. Box Number is Not Acceptable)

62 N.E. 90th Street

83

84 City

EL Portal

FL

85 Zip Code

33138

10. Name and Address of New Registered Agent

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

04-09-98

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME
D EVERETT, WARY
STREET ADDRESS
5601 BISCAYNE BLVD
CITY-ST-ZIP
MIAMI FL 33137

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME
DPT
Wary Everett
1.3 STREET ADDRESS
62 N.E. 90th Street
1.4 CITY-ST-ZIP
ELPortal, Florida 33138

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
DVS
Shirley Everett
2.3 STREET ADDRESS
62 N.E. 90th Street
2.4 CITY-ST-ZIP
ELPortal, FLorida 33138

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

04-09-98

Daytime Phone # 0184418

CR2E034 (10/97)