

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

FILED
Jun 01 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 # **P97000044257 (8)**
1. Corporation Name

NATIONAL PROPERTY MANAGEMENT, INC.

Principal Place of Business 200 S BISCAYNE BLVD SUITE 2410 MIAM FL 33131	Mailing Address 200 S BISCAYNE BLVD SUITE 2410 MIAM FL 33131
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 05/19/1997	
4. FEI Number 65-0753588	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 420 Lincoln Road Suite, Apt. #, etc. 22 Suite 432 City & State 23 Miami Beach, FL Zip 24 33139	2a. Mailing Address 26 420 Lincoln Road Suite, Apt. #, etc. 27 Suite 432 City & State 28 Miami Beach, FL Zip 29 33139	Country 25 U.S.A. Country 30 U.S.A.
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9. Name and Address of Current Registered Agent

**PENINSULA REGISTERED AGENTS, INC.
200 S BISCAYNE BLVD
MIAM FL 33131**

10. Name and Address of New Registered Agent

81 Name PLC Investments, Inc.
82 Street Address (P.O. Box Number is Not Acceptable) 420 Lincoln Road
83 Suite 432
84 City Miami Beach, FL
85 Zip Code 33139

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 *Sandra B. Mortham, Secretary* DATE **4/28/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CEJAS, PAUL L 200 S BISCAYNE BLVD STE 2410 MIAM FL 33131 <input checked="" type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 7000002542647 -06/01/98--01102--006 ***150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NEITZEL, JULIE L 200 S BISCAYNE BLVD STE 2410 MIAM FL 33131 <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 420 Lincoln Road, Suite 432 Miami Beach, Florida 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CEJAS, PABLO L 200 S BISCAYNE BLVD STE 2410 MIAM FL 33131 <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition CEO, Chairman, Director Pablo L. Cejas 420 Lincoln Road, Suite 432 Miami Beach, Florida
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition President Robert M. Moreira 420 Lincoln Road, Suite 432 Miami Beach, Florida 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Secretary, Treasurer, Director Hilda C. Montero 420 Lincoln Road, Suite 432 Miami Beach, Florida 33139
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Vice-President Arturo L. Fernandez 420 Lincoln Road, Suite 432 Miami Beach, Florida 33139 <i>cc 6/1</i>

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 *Hilda C. Montero* *Arturo L. Fernandez* *Robert M. Moreira* *Paul L. Cejas* *Julie L. Neitzel*

CR2E034 (10/97)