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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000051960 (7)

TWENTIETH LANE PROPERTIES, INC.

FILED Mar 31 1998 8:00am Secretary of State



| | | | | { | |
|--|-----------------------------------|-----------------------------------|---|---|--|
| Principal Place of Business | Mailing Address | | | . I 1881/1881 118 1810 1880) State Baile Baile Baile Beith Seise Beith Jene Coine Beith Baile Coine | |
| 14445 NE 20TH LN. 14445 NE 20TH LN. | | | | | |
| N. MIAMI FL 33181 | N. MIAMI FL 33181 | MIAMI FL 33181 | | DO NOT WRITE IN THIS SPACE | |
| | | | | 3. Date Incorporated or Qualified | |
| | | | | 06/12/1997 | |
| 2. Principal Place of Business | 2a. Mailing Address | | | A FEI Number - Applied For | |
| 21 | 26 | | | 65-00 17933 Not Applicable | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | | S8.75 Additional | |
| 22 | 27 | | | 5. Certificate of Status Desired Fee Required | |
| City & State | City & State | | | 6. Election Campaign Financing \$5.00 May Be | |
| 23 | 28 | | | Trust Fund Contribution | |
| Zip Country | Zip | Countr | у | 8. This corporation owes or has paid the current year Intangible | |
| 24 25 | 29 | 30 | | Personal Property Tax due June 30. Yes No | |
| 9. Name and Address of Curre | ant Registered Agent | | | 10. Name and Address of New Registered Agent | |
| ATRIUM REGISTERED AGENTS, IN | IC. | 8. | Name | | |
| 1500 SAN REMO AVE., STE. 125 | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| CORAL GABLES FL 33146 | | | | diods (t.) of box (tallibus in the tribus parties) | |
| | | 83 | 3 | | |
| | | 84 | L Cav | 85 Zip Code | |
| | | 0. | City | FL S Z COOK | |
| 11. Pursuant to the provisions of Sections 607.05 | 002 and 607.1508, Florida Statu | ites, the above | /e-named co | orporation submits this statement for the purpose of changing its registered | |
| office or registered agent, or both, in the Stat agent. I am familiar with, and accept the obli | te of Florida. Such change was | : authorized b | ov the coroor | ration's board of directors. I hereby accept the appointment as registered | |
| | gations of decitor correspon | TO TOD OTATOR | ,,, | | |
| SIGNATURE Signature, typed or printed name of registered is | gent and title if applicable. (NO | TE: Registered A | gent signature req | pulred when reinstaling) DATE | |
| 12. OFFICERS A | ND DIRECTORS | 13. | ········· | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE D | ☐ DELETE | 1.1 TITLE | | ☑ Change ☐ Addition | |
| NAME NUNEZ, MIKE | | 1.2 NAME | | WAR LANDS | |
| STREET ADDRESS 14445 NE 20TH LN. | | 1.3 STREE | T ADDRESS | 408 WEST CARE FR. | |
| CITY-ST-ZIP N. MIAMI FL 33181 | | 1.4 CITY- | ST-7IP | 1408 WEST LAKETR. FT. LAUDERDALE FL 33316 | |
| TITLE D | DELETE | 21 TITLE | | ☐ Change ☐ Addition | |
| NAME LEIBOWITZ, MARVIN | | 2.2 NAME | | | |
| STREET ADDRESS 11410 N. BAYSHORE DR. | | | T ADDRESS | | |
| 48448 21 00404 | | 2. 4 CITY | i i | | |
| TITLE D | DELETE | 3.1 TITLE | - 31 - 2N | Change Addition | |
| NAME LEIBOWITZ, LARRY | _ | 3.2 NAME | | | |
| STREET ADDRESS 148 W. 23RD ST. #10E | | | T ADDRESS | | |
| NEW YORK ARE JAKES | | 3 4. CITY | | | |
| CITY-ST-ZIP NEW YORK NY 10011 | DELETE | 4.1 TITLE | O1 TEN | ☐ Change ☐ Addition | |
| | | 4. 2 NAM | . | _ · _ | |
| NAME OTHER ADDRESS | | 1 | T ADDRESS | | |
| STREET ADDRESS | | | | | |
| CITY-ST-ZIP | DELETE | 4.4 CITY- 5.1 TITLE | SI-ZIP | Change Addition | |
| TITLE | | | | - Crongo - Haddidii | |
| NAME | | 5.2 NAME | - 1 | | |
| STREET ADDRESS | | | T ADDRESS | | |
| CITY-ST-ZIP | | 5.4 CITY- | ST - ZIP | | |
| TITLE | | | | 1 1 // 1 / 1 / 1 / 1 / 1 / 1 / 1 / 1 / | |
| TITLE, | ☐ DELETE | 6.1 TITLE | | Change Addition | |
| NAME | ☐ DELETE | 6.1 TITLE 6.2 NAME | | ☐ Change ☐ Addition | |
| · ' | ☐ DELETE | 6.2 NAME | T ADDRESS | ☐ Change ☐ Addition | |
| NAME STREET ADDRESS CITY-ST-7IP | | 6.2 NAME 6.3 STREI 6.4 CITY | T ADDRESS | Change Addition In Section 119.07(3)(i), Florida Statutes. further cedify that the information | |

indicated on this annual report of supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under our trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my hame appears in Block 12 or Block 13 if changed, or on an adachment with an address.