

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

FILED
Jun 26 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000052122 (3)
1. Corporation Name
OAK VIEW DEVELOPERS, INC.



Principal Place of Business: 2151 LEJEUNE RD., STE. 200 CORAL GABLES FL 33134
Mailing Address: 2151 LEJEUNE RD., STE. 200 CORAL GABLES FL 33134

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	5040 N.W. 7th St	26	5040 N.W. 7th St	06/12/1997	
22	700	27	700	4. FEI Number	Applied For
23	MIAMI, FL	28	MIAMI, FL	65-0774617	Not Applicable
24	33126	29	33126	5. Certificate of Status Desired	\$8.75 Additional Fee Required
25	U.S.	30	U.S.	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.	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE FL 32301-2525

10. Name and Address of New Registered Agent

81	Name	GUSTAVO BENGOCHEA JR.
82	Street Address (P.O. Box Number is Not Acceptable)	5040 N.W. 7th St,
83	Suite	SUITE 700
84	City	MIAMI
85	State	FL
86	Zip Code	33126

11. Pursuant to the provisions of Sections 607.0602 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]* GUSTAVO BENGOCHEA JR. DATE: 06/24/98

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	BENGOCHEA, GUSTAVO JR.	
STREET ADDRESS	2151 LEJEUNE RD., STE. 200	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	FERRI, EUGENE C III	
STREET ADDRESS	2151 LEJEUNE RD., STE. 200	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	PADRON, WILFREDO R	
STREET ADDRESS	2151 LEJEUNE RD., STE. 200	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	SOSA, JUAN D	
STREET ADDRESS	2151 LEJEUNE RD., STE. 200	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	BENGOCHEA, GUSTAVO JR.	
1.3 STREET ADDRESS	5040 N.W. 7th St, Ste. 700	
1.4 CITY-ST-ZIP	MIAMI, FL 33126	
2.1 TITLE	DV	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	FERRI, EUGENE	
2.3 STREET ADDRESS	12243 S.W. 129 Ct	
2.4 CITY-ST-ZIP	MIAMI, FL 33186	
3.1 TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	PADRON, WILFREDO R.	
3.3 STREET ADDRESS	12243 S.W. 129 Ct	
3.4 CITY-ST-ZIP	MIAMI, FL 33186	
4.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	SOSA, JUAN D	
4.3 STREET ADDRESS	12243 S.W. 129 Ct	
4.4 CITY-ST-ZIP	MIAMI, FL 33186	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	000002574410	
5.3 STREET ADDRESS	-06/29/98 - 01022 - 038	
5.4 CITY-ST-ZIP	***550.00	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	000002574410	
6.3 STREET ADDRESS	-06/29/98 - 01022 - 038	
6.4 CITY-ST-ZIP	***8.75	

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]* GUSTAVO BENGOCHEA JR. DATE: 6/24/98

CF2E034 (10/97)

305-529-0200