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

PROFIT CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P97000071714 (4) DOCUMENT # 1. Corporation Name

WHITE SATIN PROPERTIES, INC.

Principal Place of Business

Mailing Address

FILED Jan 27 1998 8:00am Secretary of State



2810 NE 60 STREET FT LAUDERDALE FL 33308		2810 NE 60 STREET FT LAUDERDALE FL 33308							
						DO NOT WRITE IN THIS SPA	ACE		
	_					 Date Incorporated or Qualified 08/19/1997 			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number	At	plied For	
21		26				65-0778881	No	t Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75	Additional	
22		27				5. Continuate of Status Desired	Fee Re	berlupe	
City & State	9	City & State				6. Election Campaign Financing	\$5.00	May Be	
23		28	· 			Trust Fund Contribution	Added	to Fees	
Zip	Country	Zip	1	ıntry		8. This corporation owes or has paid the currer		_ '	
24 25 29			30			Personal Property Tax due June 30. Yes No			
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
INCORPORATORS PLUS, INC.				81 Name					
	14 N UNIVERSITY DRIVE		82 Street Ac		Street Add	dress (P.O. Box Number is Not Acceptable)			
PU	ANTATION FL 33322								
				83					
				84	City	FL	85 Zip (Code	
11. Pursuant t	to the provisions of Sections 607.050	02 and 607.1508, Florida Stat	ules, the a	bove	-named cor	rporation submits this statement for the purpose of chation's board of directors. I hereby accept the appoin	nanging it	s registered	
office or ri	egi ster ed agent, or both, in the State m fam iliar with, an d a ccept the oblig	e of Florida. Such change was actions of, Section 607.0505. I	s authorize Florida Sta	d by lutes	the corpora	ation's board of directors. I hereby accept the appoin	itment as	registered	
SIGNATURE		, , , , , , , , , , , , , , , , , , , ,						ŀ	
SIGIVATURE	Signature, typed or printed name of registered ag	cot and title if applicable (N	OTE Registere	d Age	nt signature requ	uired when reinstating) DATE.			
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND D		S IN 12	
TITLE	0/2	☐ DELET e	☐ DELETE 1.4 TI			L	Change	Addition	
NAME				AME					
STREET ADDRESS				TREET.	ADDRESS				
CITY-ST-ZIP				TY-SI	r - ZIP				
TITLE	☐ DELETE			2.1 TITLE		L	Change	Addition	
NAME			. 2.2 N						
STREET ADDRESS			2 3 S1		ADDRESS	1			
CITY-ST-ZIP				2. 4 CITY-ST-ZIP					
TITLE	L_] DELETE			3 1 TITLE		L.	Change	Addition	
NAME			3.2 N	ME					
STREET ADDRESS			3.3 S1	REET.	ADDRESS				
CITY-ST-ZIP			3.4. C	ITY-S	T - ZIP				
TITLE		DELETE	4.1 TI	TLF			Change	☐ Addition	
NAME			4.2 N	AME]	
STREET ADDRESS			4.3 \$1	REET	ADDRES\$				
CITY-ST-ZIP			4.4 C	TY-ST	I - ZiP				
TITLE	DELETE 5			5 1 TITLE			Change	Addition	
NAME			5 2 N/	AME					
STREET ADDRESS			. 5351	AEET A	ADDRESS				
CITY-ST-ZIP			5 4 C	TY-ST	- ZiP				
TITLE		DELETE	61 TI	TLE			Change	Addition	
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 \$1	REET /	ADDRESS				
CITY-ST-ZIP			6.4 CI						

14. Thereby 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 chapter), or on an attachment with an address.