PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # **P97000080363** 1. Corporation Name

77111111	H HEAL ESTATE PARTNERS	3, INO:					
Principal Place	e of Business	Mailing Address			ditter Amest Batiffs Imter agrida ere.	R ESTAN ITEL FACE	
155 S MIAMI AV	VE	155 S MIAMI AVE		·			
STE 1150		STE 1150		DO NOT W	RITE IN THIS SPACE		
MIAMI FL 33130 US)	MIAMI FL 33130 US		3. Date Incorporated or Qualife			1
03		00		09/15/1997			i
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number		pplied For	l
21		26		65-0785115		ot Applicable	l
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	B27	Additional equired	l
22		City 2 State		A Charles Campaign Financia		May Bo-	l
City & State		City & State		==== = 6. Election Campaign Financin Trust Fund Contribution		to Fees	
Zip	Country	Zip	Country	8. This corporation owes the co	urrent year Intangible	/	
24	25	29 3	io	Personal Property Tax.	Yes	DZNo	ĺ
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of Nev	w Registered Agent		l
			81 Name	BANGE STRUTH			
SEGAL, JONATHAN W ESQ.			82 Street		ptable)		l
	OUTHEAST 2ND AVE. E 730		83 -	5 D. Filanca H			ĺ
	6 730 Al FL 33131		ုိ <u>ု</u> ဒီ ပ	ite 1150			l
	m 1 C 00701		84 City			Code フレラン	ĺ
		D - 4 COZ 4500 Florido Stabutos	4	corporation submits this statement for the	he purpose of changing it	s registered	1
44 Pursuant	to the provisions of Sections 607 050	IZ ANG MIZ. 15UN. FIONGA SIZIUSES					
11. Pursuant	to the provisions of Sections 607.050, egistered agent, or both, in the State	of Florida, Such change was autitions of Section 607 0505. Florid	horized by the corpo	ration's board of directors. I hereby acc	cept the appointment as r	egistered	•
agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations of the control of th	tions of, Section 607.0505, Florid	la Statutes.	and the state of dispersion in the state of	cept the appointment as r	egistered	
agent. I a	egistered agent, or both, in the State of familiar with, and accept the obligation of familiar with and accept the obligation of familiar with a specific point of familiar with	of Florida. Suital Changs was ablitions of, Section 607.0505, Florida Jovathan W. N. and little of applicable. (NOTE: R	ta Statutes.	Sa horizatating)	3/23/99		(86
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office or n agent. (a) SIGNATURE 112. 1TITLE NAME STREET ADDRESS	spistered agent, or born, inche State on familiar with, and accept the obligation Spisialure, typed or ported name of recipiered agent OFFICERS AN D SIRLIN, DANIEL 4620 NORTH STATE ROAD 7	of Florida. Suction 607.0505, Florida. Suctions of, Section 607.0505, Florida. Successful of the Section 607.05	to Statutes. Scanness Agent signature in 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS	Sa hor reinstating)	3/23/99 DATE OFFICERS AND DIRECT	ORS IN 12	R2E034 (11/98)
office or n agent. (a) SIGNATURE 1.12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sphalare, typed or ported name of recipired age OFFICERS AN D SIRLIN, DANIEL	Of Floridas Suttle Charles was auditions of, Section 607.0505, Florida Suttlens of Workshop W. In and life of applicable. (NOTE: R ID DIRECTORS DELETE SUITE 300	to Statutes. Scanness of the bare in 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZP	Sa hor reinstating)	3/23/99 DATE OFFICERS AND DIRECT	ORS IN 12	CR2E034 (11/98)
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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 receipt or inustree 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 the appears with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

FILED

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90032 031 ***158.75