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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000089534 (6)

DOUGLAS ROAD PROPERTY, INC.

## **FILED** Mar 11 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							T TRANSPORT THE TWEET FRANCE	BBHI BBHFU	Biti Abibi ibit	. 1919: 91199 1	illi vibi ippi
801 PONCE DE LEON BLVD SUITE 501 S01 PONCE DE LEON BLV				D SHATE 501							
CORAL GABLES FL 33134		CORAL GABLES FL 33134				DO NOT WRITE IN THIS SPACE					
						3.	Date Incorporated or			31 7101	····
							10/17/1997				
2. Principal F	Place of Business	2a. Mailing Address				4.	CCI Altrophes		. 77	A	pplied For
21		26	26				65-079	1563		N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #,			c			F	Certificate of Status I	nesired			Additional
22 27										Fee R	tequired
City & State City & State							Election Campaign Fi	_			May Be
Zip	Country	28 Zip	Zip Country				Trust Fund Contributi		<u> </u>		to Fees
·	25	29	30	iu y		В.	This corporation owe: Personal Property Ta:		_	rent year in ∐Yes	
24	9. Name and Address of Curren		30			10.	Name and Address				
IDI	ONDO, ANDRES J CPA			81	Name						
901 PONCE DE LEON BLVD SUITE 501				82	Stroot Ad	ddroon (D	O Pay Number is No	t Ancenta	hla\		
CORAL GABLES FL 33134				02	Stieet Ad	Address (P.O. Box Number is Not Acceptable)			ľ		
				83							
				84	City			<u> </u>		as 7in	Code
			1	-	City				FL	<b>85</b> Zip	COGA
11. Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607 1508, Florida Statut	es, the ab	ove-	named co	orporation	n submits this stateme	nt for the	purpose of	changing i	ts registered
agent. I a	am familiar with, and accept the obliga	ations of Section 607.0505, Fl	orida Statu	ites.	ino corpor	nauviisu	OBIG OF GIRECTORS, FIRE	ibby acce	prine app	/ v	o registereo
SIGNATURE	Lucu J	front AN	DAES			RION			1/39	198	
12.	Signature Typed or printed name of registered ago OFFICERS ANI		Hegislered	Apen	t signature req		reinstating) ADDITIONS/CHANGES	TO OFF	PERS AND	DIRECTO	RS IN 12
TITLE	P, D	DELETE	1.1 TIT	LE			ADDITIONAL PRINCIPAL	10011	OCTIO AITE	Change	Addition
NAME	Lourdes 6 CAB	ALLERN	1.2 NAI	ME							
STREET ADDRESS	GII OCEAN DE #9	F	1.3 STE	REET A	ADDRESS						
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TITLE MARIANO C. Puig DELETE			2.1 TiTU	2.1 TITLE			<del></del>			Change	Addition
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STREET ADDRESS				REET ADDRESS							1
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NAME	Patricia Catallero 2726 Auton Acad		3.2 NA	3.2 NAME							
STREET ADDRESS	2726 HLTON FLOWE			3.3 STREET ADDRESS							1
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CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TITL		- 211"					Change	Addition
NAME		- Merrit	6.2 NAN								
STREET ADDRESS					DORESS						}
CITY-ST-ZIP			6.4 CIT		!						
	certify that the information supplied wi	th this filing does not qualify to				in Section	n 119.07(3)(i). Florida	Statutes I	further ce	rtify 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.

305 445 06 11