**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # P97000093113 1. Corporation Name

IRD PROP CORP

## **FILED** Mar 30, 1999 8:00 am Secretary of State

03-30-1999 90028 044 \*\*\*150.00

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Principal Place	of Business	Mailing Address		# 10051001 110 (01)1 (03)14 GOILL OB11 06411 061	is chista ittab cesar sinska isit inns	
		1101 BRICKELL AVENUE				
1101 BRICKELL SUITE 200	AVENUE	SUITE 200				
MIAMI FL 33131	1	MIAMI FL 33131		DO NOT WRITE IN TH	S SPACE	
	· · · · · · · · · · · · · · · · · · ·	,		3. Date Incorporated or Qualifed	·	
	·			10/30/1997		
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
	60 NN 15-97K DM	26 13850 FOI	rsthe Rd	APPLIED FOR	Not Applicable	€ .
Suite, Apt.		Suite, Apt. #, etc.	LUYLLE WOL		\$8.75 Additional	7
	m, 010.	27	•	5. Certifcate of Status Desired	Fee Required	İ
City & State	2000 <u> </u>	City & State		6. Election Campaign Financing	\$5.00 May Be	
	• • • /	28 Sulrosuelle	ms	Trust Fund Contribution	Added to Fees	
23 /11 /0	Country		Country	8. This corporation owes the current year		7
Zip 33				Personal Property Tax.	☐Yes <b>Z</b> No	-
24 33	9. Name and Address of Current	29 21784 30		10. Name and Address of New Registere		-1
<del> </del>	9. Name and Address of Current	Registered Agent	81 Name			7
i Mari	ES DÍCKEY			James Dickey		
	BRICKELL AVE.			tress (P.O. Box Number is Not Acceptable)	11 m 11 m 7k	ماد
1				1800 1111111	1160 NW 159 TK	9
#200			83	$\circ$		-
MIAN	/II FL 33131		84 City		. R5 Zip Code	_
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11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes, tl	he above named co	poration submits this statement for the purpose ion's edged of directors. I hereby accept the app	of changing its registered	
office or re	egistered agent, or both, in the State of	of Florida. Such change was autho	orized by the corporate	tion's oderd of directors. I hereby accept the app	ointment as registered	
agent. I ai	m ramiliar with, and accept the obligat	/ e s /	Salutes. 19	Z/ (V 7/151	99	- {
	- amer > - C					
SIGNATURE	Steed on the steed company of registered comp	Land title if applicable /NOTE: Refit	istered Agent sugnature requir	red when reinstating) DATE		١,
	Signature, typed or printed name of registered agen		istered Agent signature requir		AND DIRECTORS IN 12	<b>−</b>   <u>í</u>
12.	OFFICERS AN	D DIRECTORS	istered Agent synature requir	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	on is
12.	OFFICERS AN	D DIRECTORS	13. 112m(€			on S
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12.	PSTD DICKEY, JEAN 1101 BRICKELL AVENUE	D DIRECTORS	13. 1.1 DATE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	Change Addition	on S
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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 reports true and factor 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 trues empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or of an attachment with an address, with all other like empowered.

SIGNATURE: