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

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000095516 (5)

	OUTHERN PROPERTY INVE					
Principal Place of Business Mailing Address					1 18611921 178 (Britt 1981) GBritt Sparit GBritt Sales (Britt Britt Britt Britt Britt Britt Britt Britt Britt	
100 N. BISCAYNE BLVD. 21ST FLOOR NEW WORLD TOWER 100 N. BISCAYNE BLVD. 21ST FLOOR NEW WORLD T				ER		DO NOT WEITE IN THE SPACE
MIAMI FL 331	32	MIAMI FL 33132				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/06/1997
2, Principal Pl	ace of Business	2e. Mailing Address 26				4. FEI Number Applied For Not Applied For Not Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27				5. Certificate of Status Desired S8.75 Additional Fee Required
City & State		City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip	Country 25	Zip 29	30	ountr	у	8. This corporation owes or has paid the current year Intengible Personal Property Tax due June 30. Yes X No
	9. Name and Address of Curre	nt Registered Agent		\perp		10. Name and Address of New Registered Agent
BAUR, THOMAS 100 N. BISCAYNE BLYD. 21ST FLOOR NEW WORLD TOWER MIAMI FL 33132				81 82 83	Street	et Address (P.O. Box Number is Not Acceptable)
				84	City	FL 85 Zip Code
SIGNATURE	egistered agent, or both, in the Statern familiar with, and accept the oblig					ed corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered state required when religiously. DATE
12.		ND DIRECTORS	1;	3.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1	TITLE		Change Addition
NAME STREET ADDRESS	SCHERER, PETER HANS HUETTENSTRASSE 180)		1.2 NAME 1.3 STREET ADDRESS		35
CITY - ST - ZIP	D-56170 BENDORF, GERMAI	NY	1.4	CITY-	\$T-ZIP	
TITLE		DELETE	2.1	TITLE		Change Addition
NAME			2.2	NAME		,
STREET ADDRESS					T ADDRESS	is
CITY-ST-ZIP		T ocusts			ST-ZIP	
TITLE		☐ DELETE		3 1 TITLE 32 NAME		☐ Change ☐ Addition
NAME			4			
STREET ADDRESS					1 ADDRESS	8
CITY-ST-ZIP TITLE		DELETE		3.4. CITY-ST- 4.1 TITLE		Change Addition
NAME			_ f	2 NAME	•	C Sharge C House
STREET ADDRESS					T ADDRESS	25
CITY-ST-ZIP				•	ST-ZIP	~ }
TITLE	***************************************	DELETE		TITLE	V) - 411	Change Addition
MARIE			- I	NIA LOC		

14. 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 supplimental 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 tristed 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.

5 3 STREET ADDRESS

6.3 STREET ADDRESS 64 CITY-ST-ZIP

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

Hans-Peter Scherer 305-377

FILED

Mar 12 1998 8:00am

Secretary of State

Change

Addition