SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/08: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P97000095744 (3)

MANSFIELD PROPERTIES CORP.

Principal Place of Business

Mailing Address

FILED Aug 13 1998 8:00am Secretary of State



C/O RASCO. REININGER & PEREZ. P.A. 5200 BLUE LAGOON DRIVE SUITE 700 MIAMI FL 33126		C/O RASCO, REININGER & PEREZ. P.A. 5200 BLUE LAGOON DRIVE SUITE 700 MIAMI FL 33126				DO NOT WRITE IN THIS \$P ACE 3. Date Incorporated or Qualified	l
						11/07/1997	l
2. Principal Pl	ace of Business	20. Maying Addingson SANTANDER				4. FEI Number X Applied For	
21		TRUST & BAN				Not Applicable	ĺ
Suite, Apt. i	#, etc.	Suite, Apt. #, etc. 3RD FLOOR,				5. Certificate of Status Desired \$8.75 Additional	ĺ
22			27 BAHAMAS FINANCIAL CENTR			Fee Required	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be	ĺ
23		28 NASSAU, NEW				Trust Fund Contribution LJ Added to Fees	ĺ
Zip	Country	Zip N 4486		Country BAHAMAS		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	ĺ
24	25 25 Current	1201	30	30 DIMILITIE		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
14144	9. Name and Address of Currer	ir vefilgielen wheur		81 N	lame	IV. Halilo blid Address of Hew Registered Agent	ĺ
	II CORPORATE SYSTEMS, INC.						
	BLUE LAGOON DRIVE		82 Street Add		Street Addre	ess (P.O. Box Number is Not Acceptable)	
	E 700			83			
MIMAN	II FL 3 3126						
				84 C	City	FL 85 Zip Code	ĺ
11. Pursuant	to the provisions of sections 607 050	2 and 607 1508. Florida Statute	s the a	bove-par	med corpor	ration submits this statement for the purpose of changing its registered	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was a	uthoriz	ed by the	e corporation	on's board of directors. I hereby accept the appointment as registered	
SIGNATURE						ulred when reinslating) DATE	
12.	Signature, typed or printed name of registered age	nt and title if applicable. (NC ND DIRECTORS	13		i signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	É
TITLE	D	DELETE	_	TITLE		Change X Addition	į
NAME	TAYLOR, MARIA	C) DETE LE		NAME		C Oligingo E Modulon	1
STREET ADDRESS	P.O. BOX N-1682 3RD FLOOR			STREET ADD	_{dress} BAH	RESS BAHAMAS FINANCIAL CENTRE, SHIRLEY &	
CITY-ST-ZIP				1.4 City-ST-ZIP CHAI		RLOTTE STREETS	ľ
TITLE	D	DELETE		TITLE		Change X Addition	١
NAME	LOZADA, JOSE		2.2	NAME			l
STREET ADDRESS	P.O. BOX N-1682 3RD FLOOR		2.3	STREET ADD	DRESS BA	HAMAS EINANCIAL CENTRE, SHIRLEY &	
CITY-ST-ZIP	NASSAU, BAHAMAS		2.4	CITY-ST-ZIP		CHARLOTTE STREETS	
TITLE	D	DELETE	3.1	TITLE	1	Change X Addition	
NAME	CRESPO, ROBERTO		3.2	NAME	D 4	AUAMAC ETNANCIAI CENTRE CUTRIES C	
STREET ADDRESS	P.O. BOX N-1682 3RD FLOOR		3.3	STREET ADD	DRESS CH	HAMAS EINANCIAL CENTRE, SHIRLEY &	İ
CITY-ST-ZIP	NASSAU, BAHAMAS		3.4	3.4 CITY-ST-ZIP			
TITLE		DELETE	4.1	TITLE		Change Addition	
NAME			4.21	NAME			
STREET ADDRESS			4.3 (STREET ADD	DRESS		
CITY-ST-ZIP			4.4	CITY-ST-ZIP	·		
TITLE		DELETE	5.1	TITLE		Change Addition	
NAME			5.2	NAME			
STREET ADDRESS			5.3	STREET ADD	DRESS		
CITY-ST-ZIP		Brons.	5.4	CITY-ST-ZIP	·		
TITLE		DELETE	6.1	TITLE		Change Addition	
NAME			6.2	NAME			
STREET ADDRESS	Λ		6.3	STREET ADD	DRESS		
CITY-ST-ZIP		A		CITY-ST-ZIP			
	ertify that the information supplied with	this filing does not qualify for the	ne exer	nption sta	ated in seci uslanature	tion 119.07(3)(i), Florida Statutes. I further certify that the information	1

receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears an officer or director of the corporal

(242)3223588