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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000104537 (0)

13700 PROPERTIES, INC.

FILED
Mar 10 1998 8:00am
Secretary of State



Principal Plac	e of Business	Mailing Address					
	ALLYWOOD BLVD 2450 HOLLYWOOD BLVD						
SUITE 401	401 SUITE 401 WOOD FL 33020 HOLLYWOOD FL 33020				DO NOT WRITE IN THIS SPACE		
HOLLIWOOD	FL 33020	HOLLINOOD IL GOZO			3. Date Incorporated or Qualified		
					12/11/1997		
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number	Applied For	
271 <b>33</b> 41	N.E. 165 - St.	26 3341 N.F.	65		65-0815566	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	•		5. Certificate of Status Desired	\$8.75 Additional	
22		27				Fee Required	
City & State 23 N. M VA	my BEACH, Trorida	City & State  28 N · M IAM I BE	ach, F	L	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
ファンス L C	Country	Zip	Country	1	8. This corporation owes or has paid the		
24 3316		29 33160 30	0.5	<u>n                                      </u>	Personal Property Tax due June 30.  10. Name and Address of New Register	Yes No	
	9, Name and Address of Current	Hegistered Agent	<b>81</b> Nar	me -h			
	DER, LAWRENCE, H			₩.	Grand Feder-G	laser Hedy	
2450 HOLLYWOOD BLVD					ss (P.O. Box Number is Not Acceptable)	, , ,	
SUITE 401 HOLLYWOOD FL 33020				341	D.E. 1827, 21160		
nu	PETTIOOD TE STURE.		83				
			64 City	, <b>NA</b> 1 A	m Beach F	EL 85 Zip Code	
11 Pureuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the shove-ner	ed corne	vision submits this statement for the nurnos	e of changing its registered	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Statutes.							
agent. I am familiar with, and accept the obligations of, Section 697.0505, Florida Statutes.							
SIGNATURE	Signature, typed or printed name of registered agent	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	eg-stered Agent sign:	ature required	d when reinstating) DAT	= 3\2\10	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TETLE	D	DELETE	1.1 TITLE	- P/		Change	
NAME	FEDER, LAWRENCE H		1.2 NAME	Fee	182-GLASER, HEDY		
STREET ADDRESS	2450 HOLLYWOOD BLVD, STE	401	1.3 STREET ADDRE	88   3 <b>3</b>	41 N.E. 165 th Street		
CITY-ST-ZIP	HOLLYWOOD FL 33020		1.4 CITY-ST-ZIP		MIAMI BEACH FL 33/61		
TITLE		☐ DELETE	2.1 TITLE	5/	ď <b>o</b>	Change Addition	
NAME			2.2 NAME	الكارا	KER, RICKY th coto	- <del></del>	
STREET ADDRESS			2.3 STREET ADDRE	SS   3-7	341 NE 100 - 211	ex	
CITY-ST-ZIP			2.4 CITY-ST-ZIP	12	MINNI BENCH & 33/1		
TITLE		☐ DELETE	3.1 TITLE		•	☐ Change ☐ Addition	
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRE	ss			
CITY-ST-ZIP		T DELETE	3.4. CITY-ST-ZIP			Change Addition	
TITLE		☐ DELETE	4.1 TITLE			Change Addition	
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRE	ss			
CITY - ST - ZIP		□ prietr	4.4 CITY+ST-ZIP	_		Change Addition	
TITLE		☐ DELETE	5.1 TITLE			Challe Chaulion	
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRE	ss			
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP			Change Addition	
TITLE		☐ DELETE	6.1 TITLE			Change C Nooding	
NAME			6.2 NAME	.			
STREET ADDRESS			6.3 STREET ADDRE	SS			
CITY - ST - ZIP	i e		6.4 CITY+ST-ZIP				

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 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 organ attachment with an address.

2/2/00

(3,5) 947 5082