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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000011918

1. Corporation Name

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

MIAMI FL 33186

21

22

23

24

Zip

DADELAND GARDENS APARTMENTS, INC.

Principal Place of Business	
14425 COUNTRY WALK DRIVE	

Mailing Address

2a, Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28 Zip

29

14425 COUNTRY WALK DRIVE MIAMI FL 33186

FILED

Secretary of State

03-09-1999 90040 047 ***158.75

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/05/1998 pplied For FEI Number Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes the current year Intangible ☐ Yes Personal Property Tax.

HARRIS. ELLIOTT SIXTH FLOOR MCCORMICK BLDG 111 SW 3RD STREET **MIAMI FL 33130**

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Country

9. Name and Address of Current Registered Agent

-	10. Name and Address of New Registered Agent								
	81	Name							
	82	Street Address (P.O. Box Number is Not Acceptable)							
	83								
	84	City FL 85 Zip Code							

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 607.0505, Florida Statutes.

Country

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SIGNATURE	Signature, typed or printed name of registered agent and titl	le if applicable. (NOTE: R	tegistered Agent signature n	equired when reinstating)	DATE		
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	☐ Addition
NAME	GARCIA-CARRILLO, PEDRO		1.2 NAME				
STREET ADDRESS	14425 COUNTRY WALK DRIVE		1.3 STREET ADDRESS				
CITY-ST-ZIP	MIAMI FL 33186		1.4 CITY-ST-ZIP				
TITLE	S	☐ DELETE	2.1 TITLE			Change	☐ Addition
NAME	HARRIS, ELLIOTT		2.2 NAME			دو منسود	-
STREET ADDRESS	111 SW 3RD STREET SIXTH FLOOR	1	2.3 STREET ADDRESS	-			
CITY-ST-ZIP	MIAMI FL 33130		2. 4 CITY+ST-ZIP	20 an annual contract			
TITLE		☐ DELETE	31 TITLE			Change	☐ Addition
NAME			3.2 NAME				1
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4. CITY-ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			52 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				· l
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Change	☐ Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS				
			64 CITY, ST, ZID				

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 on an attached

SIGNATURE: