PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000012952

1. Corporation Name

MIRTER PROPERTIES, INC.

FILED Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90020 039 ***150.00

74077 C()	Thor Emiles, we							
Principal Place	of Business	Mailing Address						
1331 S KILLIAN			Ì					
LAKE PARK FL 33403 LAKE PARK FL 33403						DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualifed		
						02/09/1998		
2 Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	App	olied For
21 277 1		26 277 Johns	احاحا	Park. R	d.	65-0823163	Not	Applicable
Suite, Apt.	CATACOLIST I AND INC. I AND INC. I	Suite, Apt. #, etc.	211-100	1 Carres		•	\$8.75 A	dditional
22	, \$	27			1	5. Certificate of Status Desired	Fee Re	quired
City & State	e	City & State				6. Election Campaign Financing	\$5.00	May Be
23 Frank		28 Franklin	NC			Trust Fund Contribution	Added to	
Zip	Country	Zip	Cou	ntry		8. This corporation owes the current year Int	tangible	,
24 2873	14 25 U.S.A	29 28734	30 (LSA		Personal Property Tax.		ØÍNo
<u> </u>	9. Name and Address of Current					10. Name and Address of New Registered	Agent	
				81 Name		•		
	N, MANUEL			82 Street	Address	s (P.O. Box Number is Not Acceptable)		
1331 S KILLIAN DR				UZ Silber	Street Address (F.O. Box Number is Not Acceptable)			
LAKE	E PARK FL 33403			83				
				24 20			85 Zip C	
				84 City		FL	_ as Zip C	Jode
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	ons of, Section 607.0505, Fl	autnorizeo orida Stati	tes.	oration	ation submits this statement for the purpose of s board of directors. I hereby accept the appo	changing its intment as rec	registered gistered
0.0.0	Signature, typed or printed name of registered agent a			Agent signature r	required wi		ID DIDECTO	DO IN 40
12.	OFFICERS AND	· · ·	13.		۵.	ADDITIONS/CHANGES TO OFFICERS AT	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	Addition
TITLE		☐ DELETE	1.1 Ti		1100	Valanci l		
NAME			1.2 N		\e-	resa. Mira. Knippel 14 Patton Downs Rd		
STREET ADDRESS				REET ADDRESS				[
CITY-ST-ZIP				TY-ST-ZIP		wklin 120 38734	☐ Change	Addition
TITLE		☐ DELETE	2.1 ∏		1/6	se free dust	□ change	· Addition
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NAME			3.2 N			•		
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NAME			4. 2 N	AME		·		
STREET ADDRESS			4.3 S	REET ADDRESS	·			
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TITLE		☐ DELETE	5.1 TI			• •	Change	Addition
NAME			5.2 N					
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CITY-ST-ZIP				TY-ST-ZIP	<u> </u>			— 4 4 40 - 1
TITLE		☐ DELETE	6.1 T				Change	Addition
NAME	f		6.2 N					
STREET ADDRESS			6.3 S	REET ADDRESS	•			
CITY-ST-ZIP			6.4 C	TY-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 on an attachment with an address, with all other like empowered.

SIGNATURE: