PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000042739 1. Corporation Name

NAVIX REAL PROPERTIES, INC.

FILED Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90002 034 ***158.75



Principal Place of Business	ace of Business Mailing Address			T (BBITEEN TIM TAINT ENGLI ANNIS NUELL NORTH NORTH NEGRA TIDIC INDREA TITIE FANT		
2601 SOUTH BAYSHORE DRIVE. SUITE 500 2601 SOUTH BAYSHORE (COCONUT GROVE FL 33133 COCONUT GROVE FL 3315			500	İ		
COCONUT GROVE PL 33133	0000401 GHO42 12 33133	CONUT CHOYE FE 33133		DO NOT WRITE IN THIS SPACE		
				3. Date Incorporated or Qualifed	,	
				05/12/1998		
2. Principal Place of Business	2a. Mailing Address	•		4. FEI Number	. Ar	oplied For
21	26			65-0834254	No	ot Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
22		 -		5. Certifcate of Status Desired	— Foo Re	equirod -
City & State City & State				6. Election Campaign Financing \$5.00 May Be		
23	28			Trust Fund Contribution	Added	to Fees
Zip Country	Zip	Country		8. This corporation owes the current year In	tangible	_/
24 25	29 30			Personal Property Tax.	☐ Yes	No
9. Name and Address of Curre	ent Registered Agent	<u> </u>		10. Name and Address of New Registered	Agent	
		81	Name			ļ
TANNER, BARRY			Char - 1 A	Identical (D.O. Boy Number in Not Assentable)		
2601 SOUTH BAYSHORE DRIVE, SUITE 500 COCONUT GROVE FL 33133		82	Street Address (P.O. Box Number is Not Acceptable)			
		83				
Coccitor diletter to delice					,	
		84	City	FL	85 Zip	Code
007.0	1007 4500 51 11 01 4 4 4	45 5 - 11			- ,	ragistered
office or registered agent or both in the State	e of Florida. Such change was autho	orized by	the corpora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoi	ntment as re	gistered
agent. I am familiar with, and accept the oblig	jations of, Section 607.0505, Florida	s Statutés				
SIGNATURE						·
Signature, typed or printed name of registered ag	, , , , , , , , , , , , , , , , , , , ,		t signature requ	ired when reinstating) DATE	ID DIDECTO	DE IN 12
	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition
TITLE DIRECTOR	☐ DELETE	1.1 TITLE			□ ¢uaiñe	
NAME MILES E. GILMAN		1.2 NAME				ļ
STREET ADDRESS 2601 SOUTH BAYSHON	E DUNG SALLE SO	1.3 STREET	ADDRESS			ļ
CITY-ST-ZIP COCALDUT GROVE F	ار 33133	1.4 CITY-ST	T-ZIP			
TITLE DIRECTOR	☐ DELETE	2.1 TITLE			☐ Change	_ Addition
NAME W. BARRY TANNER		2.2 NAME				ļ
STREET ADDRESS 2601 SOUTH BAYS	HOUR DUINE SULLD JOH	2.3 STREET	ADDRESS .		<u>-:</u>	
CITY-ST-ZIP COCONUT GROVE	FL 33133	2. 4 CITY-S	T-ZIP		· .	
TITLE	☐ DELETE	3.1 TITLE			Change	☐ Addition
NAME	<u>—</u> ·	3.2 NAME	.			}
STREET ADDRESS	1	3.3 STREET	ADDRESS			•
		3.4. CITY-S			•	
CITY-ST-ZIP TITLE	☐ DELETE	4.1 TITLE	11-4IF	•	Change	Addition
	_ >====	4. 2 NAME		,	<u> </u>	:
NAME						
STREET ADDRESS		4.3 STREET				
CITY-ST-ZIP	[] DELETE	4.4 CITY-ST	r-ZIP		· ☐ Change	Addition
TITLE	☐ DELETE	5.1 TITLE				
NAME		5.2 NAME			•	, I
STREET ADDRESS		5.3 STREET				
CITY-ST-ZIP		5.4 CITY-ST	T- ZIP		:	
TITLE	☐ DELETE	6.1 TITLE	1		Change	☐ Addition
NAME		6.2 NAME	1			
STREET ADDRESS		6.3 STREET	ADDRESS			'
1	•		- 1			

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: W. BAWE FANNE W. CLUBY Lumm.

1/15/99 Date (305)250-640

:R2E034 (11/98