

**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

**FILED**

98 JUN 25 PM 1:11

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT P98000056588**  
1. Corporation Name  
**EDWARDS REALTY INVESTMENTS OF MIAMI, INC.**

Principal Place of Business Mailing Address  
520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131  
520 BRICKELL KEY DRIVE SUITE 0-305 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 2a. Mailing Address

21 Suite, Apt. #, etc 26 Suite, Apt. #, etc

22 City & State 27 City & State

23 Zip Country 28 Zip Country

24 25 29 30

3. Date Incorporated or Qualified  
12/4/97

4. FEI Number Applied For  
**APPLIED FOR**

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
**ROJAS, MARCO E.**  
520 BRICKELL KEY DRIVE  
SUITE 0-305  
MIAMI, FL 33131

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.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	President/Director	<input type="checkbox"/> DELETE
NAME	Mazuela, Monica	
STREET ADDRESS	520 Brickell Key Drive, Ste. 0-305	
CITY-ST-ZIP	Miami, Fl 33131	
TITLE	Vice President	<input type="checkbox"/> DELETE
NAME	Rojas, Marco	
STREET ADDRESS	520 Brickell Key Drive, Suite 0-305	
CITY-ST-ZIP	Miami, Fl 33131	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY-ST-ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY-ST-ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY-ST-ZIP	

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\*\*\*\*150.00 \*\*\*\*150.00

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 a duly authorized agent empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of this report.

SIGNATURE: *Marco Rojas* 4/16/98 (305) 374-3800

CR2E034 (10/97)