PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P98000059697

Summit	COMMERCIAL REAL ESTAT	TE, INC.									
Principal Place	of Business	Mailing Address				1 JANHANI	tim inimi emitt dente t	I Briss a Base a Cr	IST BISTO STILL BIND	(Mits sees seus	
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2. Principal Pl	ace of Business	2a. Mailing Address				Number	CUTK	70	Ap	plied For	
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Zip	25		30				perty Tax.		Yes	□No	
24	9. Name and Address of Current				10. Na	me and /	ddress of New	Register	ed Agent		
			Ī	81 Name	Reni	υDE	HOTER2			(
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COR	AL GABLES FL 33134		ľ	83							
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11, Pursuant	to the provisions of Sections 607.0502	and/607.1508, Florida Statute	s, the ab thorized	ove-named of by the corpo	corporation su viation's board	pmits this of directo	statement for the	e purpose ept the ap	of changing its pointment as re	registered gistered	
11, Pursuant office or n	to the provisions of Sections 607.0502 egistered againt, or both, in the State of familiar with, and accept the obligation	2 and 607.1508, Florida Statute of Florida. Such change was au- tions of, Seption 607.0505. Flori	s, the ab thorized da Statu	ove-named of by the corpo- les.	corporation su viation's board	ibmits this of directo	statement for the	e purpose ept the ap	of changing its pointment as re	registered gistered	
SIGNATURE	to the provisions of Sections 807.0502 registered agent, or both, in the State of m familiar with, and accept the obligations of the control	10 - 120	•		corporation su eration's board	pmits this of directo	statement for the rs. I hereby acco	e purpose epi the ap 99	of changing its pointment as re	registered gistered	æ
SIGNATURE	Signature, typed or printed name of registered signal	and title if policiable. / (NOTE:	•		corporation su mation's board	ibmits this of directo	statement for the statement fo	DATE	·	PRS IN 12	198)
SIGNATURE	Signature, type or printed name of registered signature. OFFICERS ANI	and title if policiable. / (NOTE:	Required /	gent signeture re	corporation su mation's board	ibmits this of directo	statement for the statement fo	DATE	·		(41/98)
SIGNATURE	Signature, triple or printed name of registered signal OFFICERS AND	and use if policable. / (NOTE)	Required /	gent signetture re	corporation su mation's board	ibmits this of directo	statement for the statement fo	DATE	AND DIRECTO	PRS IN 12	34 (11/98)
SIGNATURE 12. TITLE NAME	Signature, triple or printed name of registered signal OFFICERS AND PSTD HOFER, GERLINDE E	D DIRECTORS	13. 1.1 T/TL 1.2 N/A	gent signetture re	corporation su mation's board	ibmits this of directo	statement for the statement fo	DATE	AND DIRECTO	PRS IN 12	2F034 (11/98)
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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 a petachment with an appears with all other like empowered.

SIGNATURE:

FILED
May 01, 1999 8:00 am
Secretary of State
05-01-1999 90075 044 ***150.00