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

CORPORATION **ANNUAL REPORT** 1999



FLORIDA DEPARTMENT OF STATE

Secretary of State: DIVISION OF CORPORATIONS

DOCUMENT # P98000061806 1. Corporation Name

PARK AVENUE T.L.C., INC.

Principal Place of Business

918B PARK AVEN LAKE PARK FL 33		918B PARK AVENUE LAKE PARK FL 33403		
2. Principal Plac	e of Business	2a. Mailing Addres	ss	
21		26		
Suite, Apt #, etc.		Suite, Apt. #, €	etc	
22		27		
City & State		City & State		
23		[28]		
Ζφ	Country	[Zip	Country	
24	25	29	30	
	9. Name and Address of Co	rrent Registered Agent	81 Nam	

Mailing Address

AMERILAWYER 343 ALMERIA AVENUE CORAL GABLES FL 33134

FILED 93 MPR 26 MIII: 42 OF OF STATE.



DO	TON	WF	RITE	IM	THIS	SPACE

07/14/1998		
4. FEI Number 65-0851466		Applied For Not Applicat
5. Corblicate 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 the current year Intangible Personal Property Tax 10. Name and Address of New Registered Agent

1	Spiegel & Utrera, P.A.
2	Street Address (F.O. Box Number is Not Acceptable)
-	Street Address (P.O. Box Number is Not Acceptable) 343 Almeria Avenue
3	

| 85 | Zip Code | 33134 Coral Gables 11. Pursuant to the provisions of Sections 6/1 0/1/2 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 provision of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar to price a change of the provision of Florida Statutes.

City

SIGNATURE By: OFFICERS AND DIRECTORS 13. ADDITIO 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

	_ 14-	Of Figure 2 and Office	·	13.	
	TITL€	PD	[] DELETE	11 Trice j	
	NAME	PETERS, THOMAS G		1.2 NAME	
1	STREET ADDRESS	9188 PARK AVENUE		13 STREET ADDRESS	
	CITY-ST-ZIP	LAKE PARK FL 33403		14 Q(TY-S). Z(F)	
	TITLE	STD	[] DELETE	211006	
1	NAME	JOPEK-PETERS, JOYCE RN		2.2 NAME	
	STREET ADDRESS	918B PARK AVENUE		23 STREET ADORESS	
	CITY-ST-ZIP	LAKE PARK FL 33403		2.4 City-S1.7/P	
	TITLE		[DELETE	317111.6	
	NAME			3.2 NAMI	
	STREET ADDRESS			3 1STREELADORESS	
1	CITY-ST-ZIP			34 CITY 51-2IF	
	TITL€		[DELETE	4 1 TH LE	
	NAME.			4-2 NAM:	
1	\$TREET ADDRESS			43 STREET ADDRESS	
	CITY-ST-ZIP			4.4 CH Y-ST-ZIF	
	TITLE		[] DELETE	5 V TiffeF	
	NAME			5.7 NAME	
	STREET ADORESS			53 STREET ADURESS	
	CITY-ST-ZIP			54 CiT t - \$1 - ZiF	
	TITLE		[DELETE	61 TITLE	
	NAME			62 NAME	
	STREET ARROSSS	'		63 STREET LADIORESS	

200002857452 -04/29/99--01120--011 ****150.00 ****150,00

[] Change [] Addition

[| Change

F | Addition [| Change

[| Change

[| Addition

64 CHY-\$1-701 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 suppliemental 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.

54 432 5 334

CR2E034 (11/98)

[] Addition

[|No