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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## FILED Mar 26, 1999 8:00 am Secretary of State

03-26-1999 90019 050 \*\*\*150.00

DOCUMENT #	P98000092173

Corporation Name

ATJC PROPERTY, INC.

71100 111	or Entry Mo.												
Principal Place	of Business	Mailing A	ddress					( 188/1887 ((8	(#18) (#10) ##16) <b>#</b>	<b>.</b> (11 <b>46</b> 11) <b></b> .	#4:# (1 <b>##</b> ) (1#4) (	****	
20400 N.E. 30TH AVENUE 20400 N.E. 30TH A AVENTURA FL 33180 AVENTURA FL 3311				E				- / Ter - 1				_ •	
	manage of the second se							. Date Incorporate	DO NOT WR		SPACE		
							3	•	ed of Qualify			}	
B. Dissingl Di	of Business	2- Mailin	a Address					10/29/1998 FEI_Number			ΙΔn	plied For	
2. Principal Pi	ace of Business	2a. Mailing Address					"	ີ 6 <u>5</u> - ເ	9017	67	<u> </u>	t Applicable	
Suite, Apt.	# etc		Suite, Apt. #, etc.								\$8.75 A		
22	r, 0.0.	27	<del></del>				5. Certificate of Status Desire				Fee Re		
City & State			State				6. Election Campaign Finance				\$5.00	Mav Be	
23		28						Trust Fund Cont	_		Added to		
Zip	Country	Zip		Coun	itry		8	. This corporation	owes the cur	rent year Inta	angible		
24	25	29	[:	30			Personal Property Tax.					□No	
	9. Name and Address of Curren	t Registered /	Agent			10. Name ar			ress of New	Registered A	Agent		
	PARI D			1	81	Name							
	, EVAN U			H	82	Street A	Address (	P.O. Box Number	is Not Accept	able)			
	PONCE DE LEON BOULEVARD				-	Outour							
	E 1125				83								
COR	AL GABLES FL 33134			F	84	City					85 Zip C	Code	
	·				1	•				FL_	1 - 1		
11. Pursuant office or reagent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.150 of Florida. Suc tions of, Section	8, Florida Statute h change was au n 607.0505, Flori	s, the ab thorized ida Statu	ove by t tes.	named c	corporation's b	on submits this sta board of directors.	tement for the I hereby acce	purpose of pt the appoir	changing its ntment as reg	registered gistered	
SIGNATURE										DATE			
	Signature, typed or printed name of registered ager OFFICERS AN			Registered A	\gent	signature rec	equired when	reinstating) ADDITIONS/CHA	NGES TO OF	FICERS AN	D DIRECTO	RS IN 12	
12.	D OFFICERS AN	DURECTOR	DELETE	1,1 TITL	F	<del>  </del>		ADDITIONS/CHA	INGLOTIO OI	TOUR AN	Change	Addition	
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NAME	20400 N.E. 30TH AVENUE				2.3 STREET A								
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STREET ADDRESS				6.3 STF	RET	ADDRESS							
CITY-ST-ZIP				64 CIT	Y-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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