
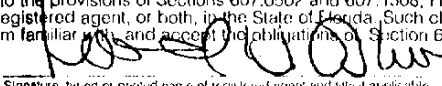


FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 20 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # S63050 (6)			
1. Corporation Name MONARCH PROPERTIES, INC.			
Principal Place of Business 1101 BRICKELL AVE., SUITE 1400 MIAMI FL 33131		Mailing Address 1101 BRICKELL AVE., SUITE 1400 MIAMI FL 33131	
DO NOT WRITE IN THIS SPACE			
2. Principal Place of Business 21 SHAPO, FREEDMAN & BLOOM Suite, Apt. #, etc. 22 200 SOUTH BISCAYNE, STE. 4750 City & State 23 MIAMI, FLORIDA Zip 24 33131		2a. Mailing Address 26 LOEB, BLOCK & PARTNERS, LLP Suite, Apt. #, etc. 27 505 PARK AVENUE, 9th FLOOR City & State 28 NEW YORK, NY. Zip 29 10022	
3. Date Incorporated or Qualified 06/26/1991		4. FEI Number 65-0318660	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Name and Address of Current Registered Agent BLOOM, LEONARD H. 1101 BRICKELL AVE., SUITE 1400 MIAMI FL 33131		10. Name and Address of New Registered Agent 81 Name 82 SOUTH FLORIDA RESIDENT AGENTS, INC. 83 Street Address (P.O. Box Number is Not Acceptable) FIRST UNION FINANCIAL CENTER 200 SOUTH BISCAYNE BLVD., SUITE 4750 84 City MIAMI FL 33131	
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, to 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:  LEONARD H. BLOOM, v/s 4/15/98 Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BLOOM, LEONARD H. 1101 BRICKELL AVE. #1400 MIAMI FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	DP BLOOM, LEONARD H. 200 SOUTH BISCAYNE BLVD, SUITE 4750 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVS WACKSMAN, LEONARD 505 PARK AVE. NEW YORK NY	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-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.

SIGNATURE: 

4/14/98 (305) 358-4441

CR2E034 (10/97)