

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 11 5:24

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S65321** (9)

1. Corporation Name:

LANDMARK PROPERTIES, INC.

Principal Place of Business

**1000 PONCE DE LEON
204
CORAL GABLES FL 33134
US**

Mailing Address

**1000 PONCE DE LEON
204
CORAL GABLES FL 33134
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/08/1991

3a. Date of Last Report
05/01/1994

4. FEI Number
65-0275320

Applied For
Not Applicable

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 has liability for intangible tax under s. 198.032,
Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. State, Apt. #, etc.

26. State, Apt. #, etc.

22. City & State

27. City & State

23. Zip

25. Locality

28. Zip

30. Locality

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NAVARRO, RAYMOND
1000 PONCE DE LEON
#204
CORAL GABLES FL 33134**

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

(Signature of Agent, if applicable; if registered agent is not applicable, leave blank)

(Signature of Registered Agent, if applicable; if registered agent is not applicable, leave blank)

(Signature of Secretary of State)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. NAME
S NAVARRO, PILAR
2. STREET ADDRESS
1000 PONCE DE LEON BLVD #204
3. CITY, ST, ZIP
CORAL GABLES FL

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
P NAVARRO, RAYMOND
2. STREET ADDRESS
1000 PONCE DE LEON BLVD #204
3. CITY, ST, ZIP
CORAL GABLES FL

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

1. NAME
2. STREET ADDRESS
3. CITY, ST, ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), Florida Statutes. I further certify that the information stated 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:

Raymond Navarro, President

5-01-95

(303) 445-1145