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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$88213

1. Corporation Name

AURORA REAL ESTATE HOLDING COMPANY

Principal Place of Business Maling Address							<u> </u>	ANT APPENDIANT BEBUILD	
Total particular Mail Fit 2010 Total particular Mail Fit 2013 Total Incorporated or Qualified 10/17/1998 Applied For Qualified 10/17/1998 Applied 10/17/1998 Applied For Qualified	Principal Plac	e of Business	Mailing Address						
2. Principal Place of Business	701 BRICKELL AVE. STE 3000 701 BRICKELL		701 BRICKELL AVE. STE 30	KELL AVE. STE 3000					
2. Principal Place of Business 2a, Mailing Address 5. Element Applied For Studies Applied For Address Applied For Address	US	·	US						•
Sufe, Apt. #, etc. Sufe,									
Suite, Apt. #, etc. Suite, Apt. #, etc. 27 27 27 27 27 27 27 2	2. Principal F	Place of Business	2a. Mailing Address						
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City & State							5. Certificate of Status Desired		
Zip Country Zip Country Zip Country B, This corporation west the current year Intangible Name and Address of Current Registered Agent S Size S S S S S S S S S						·			<u> </u>
Zip								•	•
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE STE 3000 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 registere diagent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Frorida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and the purpose of changing its register. 12.					.				o rees
9. Name and Address of Current Registered Agent INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE STE 3000 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 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, 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, 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, or both, in the State of Florida. Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. I am familiar with, and accept the obligations of, Section 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of Section 607.0502. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of the purpose of changing its register agent. I am familiar with, and accept the obligations of the purpose of changing its register agent. I am familiar with a	 -		_ 		iry				□No
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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 register of agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and of its expectation. (NOTE: Registered Agent signature required when reinstating) DATE	******			ſ	84	City		= 	Code
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	STREET ADDRESS CITY-ST-ZIP			4. 2 NA 4.3 STF 4.4 CIT	ME . REET Y-ST	ADDRESS			Additio

14. 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

54 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZiP

CITY-ST-ZIP

TITLE

NAME

DELETE

☐ Change

Addition