PROFIT CORPORATION ANNUAL REPORT 1999

DOCUMENT # V35186



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90194 029 ***158.75



BHICKEL	l investment realty (CORP.			* 100M 017000 11701 \$1101 21000 11	kije ajji kidil drbij didil didil	DEN 81811 1881
Principal Place	e of Business	Mailing Address				: Bilo Bill Gibil Didil didil didil 3	ITATA ATATA TARA
%SDB	*	96FB					
		1432 BRICKELL AVE. Miami Fl 33131			DO NOT WRITE IN THIS SPACE		
US .	,	US			3. Date Incorporated or Qualifed		
	• • •	•			05/11/1992		
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number		plied For
21		26		·*· = ·	65-0367111		t Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 / Fee Re	1
22		City & State					May Be
City & State	Ð	28			6. Election Campaign Financing Trust Fund Contribution	Added to	
Zip	Country	Zip	Country		8. This corporation owes the curr		
24	25	29 3	0		Personal Property Tax.	☐ Yes	□No _
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New	Registered Agent	
001			81 N	lame		•	
	MEZ, RUBEN D		82 S	Street Addre	ess (P.O. Box Number is Not Accept	able)	
	2 BRICKELL AVENUE VII FL 33131		02		•		
WIN	MI LE 2010 I		83				
	•		84 0	City		FL 85 Zip (Code
11 Pursuant	to the provisions of Sections 607.05	502 and 607.1508. Florida Statutes	, the above-na	amed corpo	pration submits this statement for the	numose of changing its	registered
						nt the appointment as re	nictered I
office or re	egistered agept, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was autl gations of, Section 607.0505, Florid	horized by the la Statutes.	e corporation	n's board of directors. I hereby acce	LI La	giotorea
office or re agent. I a	registered agent, or both in the Stat im familiar than, and account the oblig	e of Florida. Such change was autigations of, Section 607.0505, Florid	nonzed by the la Statutes.	e corporation	n's board of directors. Thereby acce	.,,,,,	gistored
office or re agent. I a	Signature, tyled or printed name of registered e	e of Florida. Such change was auti gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R	nonzed by the la Statutes.	e corporation	n's poard of directors. I hereby acce	DATE	
office or reagent. I as SIGNATURE	Signature, typed or printed name of registered at OFFICERS A	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R NND DIRECTORS	norized by the la Statutes. egistered Agent sig	gnature required	when reinstating) ADDITIONS/CHANGES TO OF	DATE	
office or reagent. I as SIGNATURE	Signature, by ed or printed name of registered ed	e of Florida. Such change was auti gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R	norized by the la Statutes. egistered Agent sig 13. 1.1 TITLE	gnature required	when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTO	DRS IN 12
office or reagent. I as SIGNATURE 12. TITLE NAME -	Signature, by ed or printed name of registered ed OFFICERS A PST AGUIRRE, JAVIER	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R NND DIRECTORS	epistered Agent sig 13. 1.1 TITLE 1.2 NAME	gnature required	when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTO	DRS IN 12
office or nagent. I at SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R NND DIRECTORS	egistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD	gnature required PS PA ORESS 55	when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTO Change	DRS IN 12
office or reagent. I as SIGNATURE 12. TITLE NAME -	Signature, by ed or printed name of registered ed OFFICERS A PST AGUIRRE, JAVIER	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R NND DIRECTORS	epistered Agent sig 13. 1.1 TITLE 1.2 NAME	gnature required PS PA ORESS 55	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12
office or nagent. I at SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gations of, Section 607.0505, Florid pent and title if applicable. (NOTE: R NDD DIRECTORS	egistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI	gnature required PS PA ORESS 55	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12
office or nagent. I at SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gations of, Section 607.0505, Florid pent and title if applicable. (NOTE: R NDD DIRECTORS	epistered Apent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZII 2.1 TITLE	gnature required	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12
office or nagent. I at SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gent and title if applicable. (NOTE: R NDD DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY- ST-ZII 2.1 TITLE 2.2 NAME	pnature required PS PA SSS P NORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gations of, Section 607.0505, Florid pent and title if applicable. (NOTE: R NDD DIRECTORS	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY- ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE	pnature required PS PA SSS P NORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gent and title if applicable. (NOTE: R NDD DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY- ST-ZII 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME	pnature required PS PA ORESS P ORESS P	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12 Addition Addition
office or reagent. I aid	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gent and title if applicable. (NOTE: R NDD DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD	prature required PS PA PORESS ORESS ORESS ORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12 Addition Addition
office or reagent. I aid SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gent and title if applicable. (NOTE: R NND DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 3.4 CITY-ST-Z	prature required PS PA PORESS ORESS ORESS ORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE	Signature, tyled or printed name of registered experiences A PST AGUIRRE, JAVIER 55 EAST 59 STREET	gent and title if applicable. (NOTE: R NDD DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE	prature required PS PA PORESS ORESS ORESS ORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change	DRS IN 12 Addition Addition
office or raggent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	gent and title if applicable. (NOTE: R NND DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME	prature required PS PA PORESS P PORESS P PORESS P PORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	gent and title if applicable. (NOTE: R NND DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD	PS PA NORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	gent and title if applicable. (NOTE: R NND DIRECTORS DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME	PS PA NORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or raggent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R AND DIRECTORS DELETE DELETE DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-ZI 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-ZI 4.1 TITLE	PS PA NORESS	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R AND DIRECTORS DELETE DELETE DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-Z 5.1 TITLE	prature required PS PA PORESS P PORESS P PORESS P PORESS P P PORESS P P P P P P P P P P P P P P P P P P	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	e of Florida. Such change was autigations of, Section 607.0505, Florid pent and title if applicable. (NOTE: R AND DIRECTORS DELETE DELETE DELETE	epistered Agent sig 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-Z 5.1 TITLE 5.2 NAME	PS PA PORESS - UP	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition
office or raggent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	e of Florida. Such change was autigations of, Section 607.0505, Florid gent and title if applicable. (NOTE: R AND DIRECTORS DELETE DELETE DELETE	epistered Agent signal. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-Z 5.1 TITLE 5.2 NAME 4.3 STREET AD 4.4 CITY-ST-Z 5.1 TITLE 5.2 NAME 5.3 STREET AD 6.1 TITLE 5.3 STREET AD 5.4 CITY-ST-ZI 6.1 TITLE	PS PA PORESS - UP	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change	DRS IN 12 Addition Addition
office or nagent. I ai SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, tyled or printed name of registered at OFFICERS AT AGUIRRE, JAVIER 55 EAST 59 STREET NEW YORK NY 10022	e of Florida. Such change was autigations of, Section 607.0505, Florid pent and title if applicable. (NOTE: R AND DIRECTORS DELETE DELETE DELETE	epistered Agent signal 13. 1.1 TITLE 1.2 NAME 1.3 STREET AD 1.4 CITY-ST-ZI 2.1 TITLE 2.2 NAME 2.3 STREET AD 2.4 CITY-ST-Z 3.1 TITLE 3.2 NAME 3.3 STREET AD 3.4 CITY-ST-Z 4.1 TITLE 4.2 NAME 4.3 STREET AD 4.4 CITY-ST-Z 5.1 TITLE 5.2 NAME 5.3 STREET AD 5.4 CITY-ST-ZI 5.1 TITLE 5.2 NAME 5.3 STREET AD 5.4 CITY-ST-ZI 5.1 TITLE 5.2 NAME 5.3 STREET AD 5.4 CITY-ST-ZI 5.1 TITLE 5.3 STREET AD 5.4 CITY-ST-ZI 5.3 STREET AD 5.4 CITY-ST-ZI 5.3 STREET AD 5.4 CITY-ST-ZI 5.4 CITY-ST-ZI 5.5 STREET AD 5.5 S	PS PA	when reinstating) ADDITIONS/CHANGES TO OF RIAS, 6826E EAST 59 STREET	DATE FICERS AND DIRECTO Change Change Change	DRS IN 12 Addition Addition Addition Addition

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 occiver 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 of the occiver of the corporation of the occiver of trustee empowered.

SIGNATURE

212-308-0300