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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V51217

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COM PROP OF MIAMI, INC.

| OOWITT | TOP OF HINNIN, 1110. | | | | | | | | | |
|---|---|-----------------------------------|--|------------------|------------|------------------|---|----------------------|-------------------------|---|
| Principal Plac | | • | Mailing Address | | | | # I BETT OLIEN STIDT (1981 LENIT 1981 | 4(8)) 8 8 0 | ANSE MINIT NEED | B(B() 1981 |
| 9913 NW 20 STR CORAL SPGS FL 33071 US | | | 9913 NW 20 STR CORAL SPGS FL 33071-5841 US | | | | | | | |
| •• | | | | | | | Date incorporated or Qualified 07/16/1992 | 1 | le of Last R 16/1996 | leport |
| 2. Principal P | lace of Business | 2a, Mailing | 2a, Mailing Address | | | | 4. FEI Number Applied Fo | | | oplied For |
| 21 | | 26 | | | | | 65-0349806 | | | ot Applicable |
| Suite, Apt. | #, etc. | | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | • | Additional equired |
| City & State | Α | 27 City & S | City & State | | | | B. Etc. 8: Occasion 5: | | | |
| 23 | • | <u> </u> | 28 | | | | 6. Election Campaign Financing Trust Fund Contribution | П | | May Be to Fees |
| Zip | Country | 7 _(p) | | | Country | | 8. This corporation has liability for i | | | |
| 24 | 25 | 29 | | | | | Florida Statutes | | | . 100.002, |
| | 9. Name and Address of C | | ent | .1 = | | | 10. Name and Address of New Re | gistered A | Agent | |
| | g, gabriele d. | | | | 81 | Name | | | | |
| | 3 NW 20 STR | | 82 Stre | | | Street Ad | dress (P.O. Box Number is Not Acceptab | le) | | |
| COF | RAL 8PGS FL 33071 | | | | | | | | | |
| | | | | | 83 | | | | | |
| | | | | | 84 | City | | FL | 85 Zip | Code |
| 11 Pureuant | to the provisions of Spetions 60 | 7 0502 and 607 1508 | Florida Statut | tes the al | hove | named co | rporation submits this statement for the p | | changing i | le registered |
| office or r | egistered agent or both, in the | State of Florida, Such a | change was | authorize | d by | the corpor | ation's board of directors. I hereby accep | t the app | ointment as | registered |
| - | in ramiliar with, and accept the | oniigations of, aection | 007,0000, 11 | onda Stai | uies | • | | | | ļ |
| SIGNATURE | Signature, typed or printed name of registe | red agent and title if applicable | (NO) | It: Registere | d Ager | nt signature rec | urred when reinstating) | DATE | | |
| 12. | | S AND DIRECTORS | | 13. | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | DIRECTOR | RS IN 12 |
| TITLE | PD | | DELETE | 1.1 10 | TLE | Į. | | | Change | Acdition |
| NAME | STAHL, HORST | | | 1.2 N | AME | | | | | i |
| STREET ADDRESS | 9913 NW 20 STR | | | 1.3 ST | IREET. | ADDRESS | | | | |
| CITY - ST - ZIP | CORAL SPGS FL | | | | 1Y-S1 | T-ZIP | | | <u> </u> | · • • • • • • • • • • • • • • • • • • • |
| TITLE | PD CARDICIA | Ł | DELETE | 2111 | | | | | Change | Addition |
| NAME | JUNG, GABRIELA 9913 NW 20 STR | | | | 22 NAME | | | | | |
| STREET ADDRESS | | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | CORAL SPGS FL | | DELETE | 2. 4 C 3.1 Ti | HY-S | I-ZIP | | - | Change | Addition |
| TITLE NAME | | | _ DELCIE | 3.1 H | | | | | □ Onlange | L_ ROUNION |
| STREET ADDRESS | | | | - 1 | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | | :NY-S | 1 | | | | |
| TITLE | | | DELETE | 4.1 TI | | | | | Change | Addition |
| NAME | | _ | | 4.2 N | | | | | | |
| STREET ADDRESS | | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | | ![Y-S] | - 1 | | | | |
| TITLE | , , , , , , , , , , , , , , , , , , , | | DELETE | 5.1 T/ | | | | | Change | noilitbA 🔲 |
| NAME | • | | | 5.2 N/ | AME | | | | | |
| STREET ADDRESS | | | | 5.3 \$1 | ireet a | ADDRESS | | | | |
| CITY-ST-ZIP | | VIII. | | 5.4 CI | 11Y-S1 | 1 - ZIP | | | | |
| TITLE | | | DELETE | 6.1 TI | TLE | | | | Change | Addition |
| NAME | | | | 6.2 N | AME | | | | | |
| STREET ADDRESS | | | | 63 \$1 | TREET A | ADDRESS | | | | |
| CITY-ST-2IP | | | | 640 | TY-Si | 1-7IP | | : | | |

14. I do 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 in hanged, or on an attachment with an address.

MANUATURE.

V (Gabriele MING)

4-11-97

1954) 344-3665

FILED

Apr 16 1997 8:00am

Secretary of State