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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

, , , ,	MENT # V51457 REIT, INC.	7 (2)							
Principal Plac	e of Business	Mailing Address							
2900 W. SAMPLE RD POMPANO BEACH FL 33073 US		2900 W. SAMPLE RD POMPANO BEACH FL 33073-3024 US							
						3. Date Incorporated or Qualified 07/16/1992	ſ	e of Last F 9/1996	Report
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	<u>V1/V</u>		pplied For
1		26				65-0354405		N	lot Applicable
Suite Apt	# etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
2 City & State		City & State				6, Election Campaign Financing			lequired
3	*	28				Trust Fund Contribution			May Be to Fees
Zφ	Country	Zip		ountry		8. This corporation has liability for			s. 199.032,
4]	25	29	30				Yes _		
	9. Name and Address of Currer	nt negistered Agent		81	Name	10. Name and Address of New Ro	egisterec A	gent	
	RROW, JEFFREY A S PINE ISLAND ROAD								
	TE 304			82	Street Addr	ress (P.O. Box Number is Not Accepta	bie)		
	NTATION FL 33324			83					
,				84	City			85 Zip	Code
				11.	•		FL.	1 '	
11. Pursuant office or r	registered agent or both, in the State	e of Florida Such change w	as authoriz	ed by	the corporat	tion's board of directors. I hereby acce	pt the appo	pintment as	s registered
SIGNATURE	Sociation light of protections of objectional agr			red Agen		poration submits this statement for the tion's board of directors. I hereby acceused when renstating) ADDITIONS/CHANGES TO OFFI	DATE		
SIGNATURE	Sociation light of protections of objectional agr	ont and title if applicable (NOTE: Register	red Agen			DATE CERS AND		
SIGNATURE 12. IHUE	Separation hypother proceed restrict of legistered agree OFFICERS AN	ont and intein applicable (NOTE: Register 13	red Agen		red when reinstating)	DATE CERS AND	DIRECTO	RS IN 12
SIGNATURE 12. IHLE NAME	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE	ont and intein applicable (NOTE: Register 13 1.1 1.2	red Agen I. TITLE NAME		red when reinstating)	DATE CERS AND	DIRECTO	RS IN 12
SIGNATURE 12. THEF NAME STREET ADDRESS CHY-S1-21P	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE BOCA RATON FL	unt and title if applicability ID DIRECTORS DELETE	NOTE: Register 13 1.1 1.2 1.3	red Agen Intle NAME STREET A	nt signature requir	red when reinstating)	DATE CERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. HELF NAME STREET ADORESS CITY-\$1-2P	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE BOCA RATON FL D	ont and intein applicable (NOTE: Register 13 1.1 1.2 1.3 1.4 2.1	red Agen ITTLE NAME STREET A CITY-ST	nt signature requir	red when reinstating)	DATE CERS AND	DIRECTO	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS DITY-S1-209 BITTE NAME	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE BOCA RATON FL D COYLE, OCEANIA	unt and title if applicability ID DIRECTORS DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 2.1 2.2	TITLE NAME STREET A CITY-ST TITLE	ADDRESS	red when reinstating)	DATE CERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. THE NAME SHEET ADDRESS CHY-SI-ZIP THE NAME STREET ADDRESS STREET ADDRESS	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE BOCA RATON FL D COYLE, OCEANIA 21493 WOODCHUCK WAY	unt and title if applicability ID DIRECTORS DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3	TITLE NAME STREET A CITY-ST TITLE NAME STREET A	ADDRESS ADDRESS	red when reinstating)	DATE CERS AND	DIRECTOI Change	RS IN 12
SIGNATURE 12. 1014 NAME SHEET ADORESS CHY-S1-209 NAME SHEET ADORESS CHY-S1-209	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE BOCA RATON FL D COYLE, OCEANIA	unt and title if applicability ID DIRECTORS DELETE	NOTE: Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	TITLE NAME STREET A CITY-ST TITLE	ADDRESS ADDRESS	red when reinstating)	DATE CERS AND	DIRECTOI Change	RS IN 12
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11. Pursuant office or raggest 1 a SIGNATURE 12. HELE NAME SIBELLADORESS CITY-S1-2P TITLE NAME STREET ADDRESS CITY-S1-2P TITLE NAME STREET ADDRESS SIRECTADORESS SIRECTADORESS SIRECTADORESS	OFFICERS AN D WRIGHT, GOENTJE 21770 LITTLE BEAR LANE BOCA RATON FL D COYLE, OCEANIA 21493 WOODCHUCK WAY	ont and title if applicability ID DIRECTORS DELETE DELETE	NOTE Register 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2	TITLE NAME STREET A TITLE NAME STREET A TITLE NAME STREET A CITY-ST TITLE NAME	ADDRESS ADDRESS	red when reinstating)	DATE CERS AND	DIRECTOI Change	RS IN 12 Addition
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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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 23 if changed or on an attachment with an address.

SIGNATURE:

3-22-97

954-978-0703

FILED

Mar 28 1997 8:00am

Secretary of State