## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

(4)

## **FILED** Jan 21 1998 8:00am Secretary of State

AFFORDABLE DWELLINGS, INC.					A PERATURAN AND AND AND AND AND AND AND AND AND A	
Principal Place of Busine	ess	Mailing Add	ress			a ianen aniara burat trait anten trant gibt, aibet eiste aibt biste aibti biste biste biste biste biste biste
19355 N.E. 36TH COURT. #7-E 19355 N.E. 36TH COURT. #				·E		
N. MIAMI BEACH FL 33180 N. MIAMI BEACH FL 33180						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						08/31/1992
2. Principal Place of Business 2a. N			. Mailing Address			4. FEI Number Applied For
21	26				65-0389341 Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional	
22	27				Fee Required	
City & State	City & State				6. Election Campaign Financing \$5.00 May Be	
Zip	Country	28 Zip		Country		Trust Fund Contribution
24	25	29	30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
9, Nam	e and Address of Current			i		10. Name and Address of New Registered Agent
				81	Name	
VINOLY, GLADYS L. 19355 NE 36TH CT., #7-E				-	0	700 B
N. MIAMI BEACH FL 33180				82	Street A	ddress (P.O. Box Number is Not Acceptable)
	101112 00100			83		
				84	0.1	
					City	FL 85 Zip Code
11. Pursuant to the provi	sions of Sections 607.0507	and 607.1508, F	lorida Statutes, t	he above	e-named c	corporation submits this statement for the purpose of changing its registered cration's board of directors. I hereby accept the appointment as registered
agent. I am familiar y	with and scept the obligat	ions of, Spation (	nange was auth 307.0505, Florida	onzed by a Statutes	ine corpc	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE *	(4007) 1/L	103	6-6	ላ	· V	MOLY aman 6-98
Signatyre/type	OFFICERS AND		(NOTE: Rec		int signature re	equired when reinstiting) DATE
12.	OFFICERS AND		DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
	, BRAULIO J.	<b>t</b>	JOEECIC	1.2 NAME		Cuange ☐ Addition
	NE 36TH CT., #7-E			1.3 STREET	ADDRESS	
	MI BCH. FL			1.4 CITY-S		
TITLE			DELETÉ	2.1 TITLE	1-211	☐ Change ☐ Addition
NAME			ľ	2.2 NAME		
STREET ADDRESS			1	2.3 STREET	ADDRESS	
CITY-ST-ZIP				2. 4 CITY-S	ST-ZIP	
TITLE			DELETE	3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS			1	3.3 STREET	ADDRESS	
CITY-ST-ZIP				3.4. CITY - S	ST-ZIP	
TITLE			DELETE	4.1 TITLE	Ţ	Change Addition
NAME				4. 2 NAME	1	
STREET ADDRESS			· ·	4.3 STREET	ADDRESS	
CITY-ST-ZIP				4.4 CITY - S	T-ZIP	
TITLE		L		5.1 TITLE		☐ Change ☐ Addition
NAME				5.2 NAME		
STREET ADDRESS				5.3 STREET		
CITY-ST-ZIP				54 CITY-S	I · ZIP	Dhara Lare-
TITLE		L		61 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS			1	6.2 NAME	TDDC:cos	
STREET ADDRESS				6.3 STREET		
CITY-ST-ZIP			I	6.4 CITY - ST	1 - ZIP	

I hereby certify that the information supplied with this filling 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 about 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 reportation or the received or trustee any owered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in