

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **536744** (6)

1. Corporation Name
CAMBRIDGE REALTY, INC.



Principal Place of Business: **15335 SW 85 AVE MIAMI FL 33157 US**
Mailing Address: **8025 SW 148 STR STE 104 MIAMI FL 33176 US**

3. Date Incorporated or Qualified: **06/08/1977**
3a. Date of Last Report: **01/24/1995**
4. FEI Number: **59-1751971**
5. Certificate of Status Desired: **\$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

2. Principal Place of Business: **15335 SW 85 AVE MIAMI FL 33157**
2a. Mailing Address: **Cambridge Realty Inc. 15335 SW 85 AVE MIAMI FL 33157**
21. Suite, Apt. #, etc.:
22. City & State:
23. Zip: **33157**
24. Country: **US**

9. Name and Address of Current Registered Agent
**SIEGEL, ALVIN I
15335 SW 85TH AVE
MIAMI FL 33157**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City: **FL 85** Zip Code

11. Pursuant to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute. **MAR 6 1996**

SIGNATURE: *Alvin I. Siegel Pres.*
Signature of registered agent (delete if applicable) (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	SIEGEL, ALVIN I	
STREET ADDRESS	15335 SW 85TH AVE	
CITY - ST - ZIP	MIAMI, FL 00000 33157	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	SIEGEL, GLENN	
STREET ADDRESS	15335 SW 85TH AVE	
CITY - ST - ZIP	MIAMI, FL 00000	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	OFFICIA SIEGEL
2.3 STREET ADDRESS	15335 SW 85TH AVE
2.4 CITY - ST - ZIP	MIAMI FL 33157
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: *Alvin I. Siegel - President*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-238-5777
MAR 6 1996

CR2E034 (12/95)