FILE NOW: FILING FEE IS \$61.25

FILED NONPROFIT May 01 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS POCUMENT # 750878 MIAMI BOARD OF REALTORS EDUCATIONAL FOUNDATION. Principal Place of Business Mailing Address 2050 CORAL WAY #200 2050 CORAL WAY #200 3. Date Incorporated or Qualified MIAMI FL 33145 MIAMI FL 33145 01/31/1980 4. FEI Number Applied For 59-2090044 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite. Apt. #. etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name KINNEY. TERESA KING Street Address (P.O. Box Number is Not Acceptable) 2050 CORAL WAY MIAMI FL 33145 Zip Code Pursuant to the provisions of Sections 617.0502 and 617.1508, Floride 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 617.0503, Florida Statutes. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change NAME VEISSI, MAURICE 1.2 NAME Rosen, Kenneth D. STREET ADDRESS 7800 SW 57 AVENUE #329 1.3 STREET ADDRESS 1550 Madruga Ave. SOUTH MIAM! FL Miami. Fl CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Addition 2.1 TITLE Change TITLE HOGAN, NANCY B. 2.2 NAME NAME STREET ADDRESS 1500 SAN REMO AVE., #110 2.3 STREET ADDRESS **CORAL GABLES FL** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Addition 3 1 TITLE TITLE VALLEDOR, ROBERT 32 NAME MAME Valledor, Deborah STREET ADDRESS 1450 CORAL WAY 3.3 STREET ADDRESS 1450 Coral Way Miami, Fl. MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE TD C21dstein, Sandra 240 Crandon Blyd. ROSEN, KENNETH D. NAME 4. 2 NAME 1550 MADRUGA AVE., 3RD FLOOR 4.3 STREET ADDRESS STREET ADDRESS Key Biscayne, Fl. 33149 **CORAL GABLES FL** 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE KINNEY KING, TERESA 5.2 NAME 2050 CORAL WAY #200 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 5.4 CITY-ST-ZIP Change DELETE Addition TITLE 6.1 TITLE NAME **6.2 NAME**

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY - ST-ZIP

SIGNATURE:

STREET ADDRESS