

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

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # K21337

1. Corporation Name
HJR PROPERTIES, INC.

Principal Place of Business: **444 Brickell Avenue Suite 800 Miami, FL 33131**
Mailing Address: **444 Brickell Avenue Suite 800 Miami, FL 33131**

3. Date Incorporated or Qualified: **04/19/88**
3a. Date of Last Report: **1/16/95**
4. FEI Number: **65-0043019**
Applied For: Not Applicable
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. 190.03, Florida Statutes: Yes No

2. Principal Place of Business: **444 Brickell Avenue**
2a. Mailing Address: **444 Brickell Avenue**
21. Suite, Apt. #, etc.: **800**
22. City & State: **Miami, Florida**
23. Zip: **33131** Country: **USA**
24. 25. 26. 27. 28. 29. 30.

9. Name and Address of Current Registered Agent
Rodstein, H. Josh
444 Brickell Avenue
Suite 800
Miami, FL 33131

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 607.0502 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 Statutes.

SIGNATURE: _____ DATE: _____
Signature typed or printed name of registered agent and the corporation. (For the Registered Agent, a separate signature is required when there is more than one.)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rodstein, Henry	1.2 NAME	
STREET ADDRESS	444 Brickell Ave. Suite 800	1.3 STREET ADDRESS	
CITY, ST, ZIP	Miami, FL 33131	1.4 CITY, ST, ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Rodstein, H. Josh	2.2 NAME	
STREET ADDRESS	444 Brickell Avenue Suite 800	2.3 STREET ADDRESS	
CITY, ST, ZIP	Miami, FL 33131	2.4 CITY, ST, ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY, ST, ZIP		3.4 CITY, ST, ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY, ST, ZIP		4.4 CITY, ST, ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY, ST, ZIP		5.4 CITY, ST, ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY, ST, ZIP		6.4 CITY, ST, ZIP	

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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 I changed, did on an attachment with an address.

SIGNATURE: DATE: **4/9/95**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: **305 789-9922**
CS 4/11/96

CR2E034 (12/95)