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**Mar 04 1997 8:00am
Secretary of State**

**PROFIT CORPORATION
ANNUAL REPORT
1997**



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

DOCUMENT # L12315 (2)
1. Corporation Name
BENGAL REALTY, INC.



Principal Place of Business: **11430 N. KENDALL DR. #211 MIAMI FL 33176 US**
Mailing Address: **11430 N. KENDALL DR. #211 MIAMI FL 33176-1057 US**

3. Date Incorporated or Qualified: **08/28/1989**
3a. Date of Last Report: **03/01/1996**

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, Apt., City & State, Zip, and Country.
4. FEI Number: **65-0144679**
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

9. Name and Address of Current Registered Agent: **CUMMINS, JEFFREY DREW, 9555 N. KENDALL DR. SUITE 202, MIAMI FL 33176**
10. Name and Address of New Registered Agent (81-85) fields: Name, Street Address, City, State (FL), 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE: <input type="checkbox"/> DELETE	PSD HERRERA, JOSE L. 2428 SW 23RD TERRACE MIAMI FL	1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		1.2 NAME:	
STREET ADDRESS:		1.3 STREET ADDRESS:	
CITY - ST - ZIP:		1.4 CITY - ST - ZIP:	
TITLE: <input type="checkbox"/> DELETE	TD HERRERA, MAYRA 2428 SW 23RD TERRACE MIAMI FL	2.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME:		2.2 NAME:	
STREET ADDRESS:		2.3 STREET ADDRESS:	
CITY - ST - ZIP:		2.4 CITY - ST - ZIP:	
TITLE: <input type="checkbox"/> DELETE		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: <input type="checkbox"/> DELETE		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: <input type="checkbox"/> DELETE		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: <input type="checkbox"/> DELETE		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:	

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Jose L. Herrera* **Jose L. Herrera** 2/24/97 305-858-2569
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)