

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

FILED

**Apr 03 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L84601 (8)
 1. Corporation Name
J.J. KISLAK REALTY INVESTMENTS, INC.



Principal Place of Business HOWARD J BRAFMAN 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016 US	Mailing Address HOWARD BRAFMAN 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

3. Date Incorporated or Qualified 06/29/1990	
4. FEI Number 65-0205268	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No FILED UNDER 22-1039750

9. Name and Address of Current Registered Agent

**BRAFMAN, HOWARD, J
7900 MIAMI LAKES DRIVE WEST
MIAMI LAKES FL 33016**

10. Name and Address of New Registered Agent

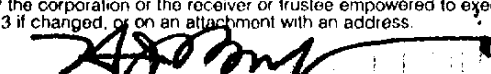
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	85 Zip Code

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 title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVS <input type="checkbox"/> DELETE	1.1 TITLE	DSVPS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BRAFMAN, HOWARD J.	1.2 NAME	
STREET ADDRESS	7900 MIAMI LAKES DR WEST	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	1.4 CITY-ST-ZIP	
TITLE	CDP <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KISLAK, JAY I.	2.2 NAME	
STREET ADDRESS	7900 MIAMI LAKES DR WEST	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	2.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	3.1 TITLE	VPAS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FENELLO, CAROL A	3.2 NAME	
STREET ADDRESS	7900 MIAMI LAKES DR. W.	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI LAKES FL 33016	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	SVPT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	THOMAS BARTELMO
STREET ADDRESS		4.3 STREET ADDRESS	7900 MIAMI LAKES DRIVE WEST
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI LAKES, FLORIDA 33106
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 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:  **March 31, 1998** (305) 364-4213

CR2E034 (10/97)