2001 UNIFORM BUSINESS REPORT (UBR)

Jul 18, 2001 8:00 am DOCUMENT # N9800001861 **Secretary of State** 1. Entity Name 07-18-2001 90260 004 ****61.25 SOUTH FLORIDA BOARD OF REALTISTS, INC. Principal Place of Business Mailing Address 610 NW 183RD ST 610 NW 183RD ST MIAMI FL 33169 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. 4. FEI Number City & State City & State Applied For 65-0244264 Not Applicable Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) BREVITT-SCHOOP, MARIE 20401 NW 2ND AVE **STE 220** City Zip Code MIAMI FL 33169 FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida. **SIGNATURE** Signature, typed or printed name of registered agent and title if applicable DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Department of State After September 12, 2001, min. will be \$236.25 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ☐ Addition Delete TITLE TITLE DANESS **ELLIS. JOSEPH** NAME NAME 1000 PONCE DELEON #212 STREET ADDRESS STREET ADDRESS **CORAL GABLES FL 33134** CITY-ST-ZIP CITY-ST-ZIP DV Change TITLE ☐ Addition Delete ELLIS, JOSEPH NAME NAME 1000 PONCE DE LEON, #212 STREET ADDRESS STREET ADDRESS **CORAL GABLES FL 33134** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE KONG-HOLNESS, MARIA NAME NAME 1733 NW 38 AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAUDERHILL FL 33311 HMARIFL 33023 CITY-ST-ZIP TITLE ☐ Delete TITLE MURRAY, MILTON NAME NAME 1000 PONCE DE LEON, #212 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CORAL GABLES FL 33134 CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE LINWOOD, YOLETTE NAME NAME 610 NW 183 ST., #2 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33169** CITY-ST-ZIP TITLE Change ☐ Addition TITI F Delete LESLY, BERNARD NAME NAME 111 N.W. 183 RD ST. #421 STREET ADDRESS STREET ADDRESS

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE:

MIAMI FL 33169

CITY-ST-ZIP

VOLUMED SEGURED

7/12/01

FILED