

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

99 DEC 23 PM 2:05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

Corporation Name
RAY K. PROPERTIES, INC.

P93000041466

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
1779 N.E. 2nd Avenue 1779 N.E. 2nd Avenue
Miami, Fl. 33132 Miami, Fl. 33132

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

3. Date Incorporated or Qualified
6/10/93
4. FEI Number
266-54-5617 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 owes the current year Intangible Personal Property Tax. Yes No

9. Name and Address of Current Registered Agent

Brian C. Perlman
334 Minorca Avenue
Suite 200
Coral Gables, Fl. 33134

10. Name and Address of New Registered Agent

81 Name
RAY A. KLEIN
82 Street Address (P.O. Box Number is Not Acceptable)
102 South Hibiscus Dr.
83
84 City Miami Beach FL 85 Zip Code 33139

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 *[Signature]* DATE *12-21-99*
(NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
DE	Brian C. Perlman 201 Alhambra Circle #503 Coral Gables, FL 33134 <input type="checkbox"/> DELETE Director	1.1 TITLE	RAY KLEIN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
DE		1.2 NAME	102 S. HIBISCUS DR President
DE		1.3 STREET ADDRESS	MIAMI BEACH, FL. 33139 SEC. Treasurer
DE		1.4 CITY-ST-ZIP	
DE		2.1 TITLE	
DE		2.2 NAME	
DE		2.3 STREET ADDRESS	
DE		2.4 CITY-ST-ZIP	
DE		3.1 TITLE	
DE		3.2 NAME	100003082331--3
DE		3.3 STREET ADDRESS	-12/28/99--01077--009
DE		3.4 CITY-ST-ZIP	***1358.75 ***1358.75
DE		4.1 TITLE	
DE		4.2 NAME	
DE		4.3 STREET ADDRESS	
DE		4.4 CITY-ST-ZIP	
DE		5.1 TITLE	
DE		5.2 NAME	REINSTATEMENT 95-99
DE		5.3 STREET ADDRESS	
DE		5.4 CITY-ST-ZIP	
DE		6.1 TITLE	
DE		6.2 NAME	W 99 0000 28 229 KE
DE		6.3 STREET ADDRESS	
DE		6.4 CITY-ST-ZIP	

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, with all other like empowered.

SIGNATURE: *[Signature]* DATE: 11/29/99 (305) 992-3291
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Brian C. Perlman Date Daytime Phone #