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May 05 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF REVENUE
Sandra B. Morfitt
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **P95000011693**
1. Corporation Name
SBR REALTY CORP.



Principal Place of Business Mailing Address

3. Date Incorporated or Qualified **2/2/95** 3a. Date of Last Report

2. Principal Place of Business 2a. Mailing Address

21 **3900 S. Ocean Drive** 26 **118 N. Bedford Road**
Suite, Apt. #, etc. Suite, Apt. #, etc.

22 **Hollywood, FL** 27 **Suite 203**
City & State City & State

23 **Hollywood, FL** 28 **Mount Kisco, NY**
City & State City & State

24 **U.S.A.** 25 **U.S.A.** 29 **10549** 30 **U.S.A.**
Zip Country Zip Country

4. FEI Number **65-0556128** 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. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

FEINBERG, JEFFREY
4851 SHERIDAN ST.
SUITE 300
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name **Charles Rosner**

82 Street Address (P.O. Box Number is Not Acceptable) **15645 Collins Avenue**

83 **Apt 406**

84 City **Miami Beach** **FL** 85 Zip Code **33160**

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 *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE DELETE

NAME **D YACHBES, BART**

STREET ADDRESS **780 N.W. 100TH TERRACE**

CITY - ST - ZIP **PLANTATION FL 33324**

TITLE DELETE

NAME **D ROSNER, CHARLES**

STREET ADDRESS **15645 COLLINS AVE. APT. 406**

CITY - ST - ZIP **MIAMI BEACH FL 33160**

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Change Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE Change Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE Change Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE Change Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE Change Addition

5.2 NAME

5.3 STREET ADDRESS **600002168926**

5.4 CITY - ST - ZIP **-05/07/97--01002--010**

6.1 TITLE Change Addition

6.2 NAME

6.3 STREET ADDRESS ***6# 165.00**

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: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (9/96)