


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

FILED  
Apr 16 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **V24800** (7)

1. Corporation Name

**KIRSNER CAMBRIDGE PROPERTIES, INC.**

Principal Place of Business

Mailing Address

**2255 GLADES ROAD  
SUITE 300 EAST  
BOCA RATON FL 33431  
US**

**2255 GLADES ROAD  
SUITE 300 EAST  
BOCA RATON FL 33431  
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**03/26/1992**

4. FEI Number

**65-0331453**

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 or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

21 **2255 Glades Road**

Suite, Apt. #, etc.

22 **Suite 419**

City & State

23 **Boca Raton, FL**

Zip

24 **33431**

Country

25 **U.S.**

2a. Mailing Address

26 **2255 Glades Road**

Suite, Apt. #, etc.

27 **Suite 419**

City & State

28 **Boca Raton, FL**

Zip

29 **33431**

Country

30 **U.S.**

9. Name and Address of Current Registered Agent

**KIRSNER, MARVIN A  
2255 GLADES ROAD  
SUITE 300 EAST  
BOCA RATON FL 33431**

10. Name and Address of New Registered Agent

81 Name **Marvin A. Kirsner**

82 Street Address (P.O. Box Number is Not Acceptable)

**2255 Glades Road**

83 **Suite 419**

84 City

**Boca Raton**

**FL**

85 Zip Code

**33431**

11. Pursuant to the provisions of Sections 607.0502 and 607.1506, 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



**Marvin A. Kirsner**

**4/13/98**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		
TITLE	DP	<input type="checkbox"/> DELETE
NAME	<b>KIRSNER, HYMAN A.</b>	
STREET ADDRESS	<b>34 STAR ISLAND</b>	
CITY-ST-ZIP	<b>MIAMI BEACH FL 33139</b>	
TITLE	DVPS	<input type="checkbox"/> DELETE
NAME	<b>KIRSNER, MARVIN A.</b>	
STREET ADDRESS	<b>2255 GLADES RD, SUITE 300 EAST</b>	
CITY-ST-ZIP	<b>BOCA RATON FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE	DVPS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	<b>Kirsner, Marvin A.</b>	
2.3 STREET ADDRESS	<b>2255 Glades Road, Suite 419</b>	
2.4 CITY-ST-ZIP	<b>Boca Raton, FL 33431</b>	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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.

**KIRSNER CAMBRIDGE PROPERTIES, INC.**

SIGNATURE: By: 

**4/13/98**

**(561) 912-3230**

CR2E034 (10/97)