

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

FILED
Jun 22 1998 8:00am
Secretary of State

PROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K94792 (4)
1. Corporation Name
213/217 NW FIRST AVENUE REALTY CORPORATION

Principal Place of Business
217 NW 1ST AVENUE
HALLANDALE FL 33009-4001

Mailing Address
217 NW 1ST AVENUE
HALLANDALE FL 33009-4001



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/13/1989	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 65-0149988	
22	City & State	27	City & State	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30 ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent

DEMEOLA, JERRY
213 NW 1ST AVE.
HALLANDALE FL 33009

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

Signature of the person filing this report (if not the officer or director)

(If the Registered Agent Signature required when registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	DIMEOLA, JERRY	1.2 NAME	
STREET ADDRESS	213 NW 1ST AVE.	1.3 STREET ADDRESS	
CITY- ST- ZIP	HALLANDALE FL 33009	1.4 CITY- ST- ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	MADONIA, JACK	2.2 NAME	
STREET ADDRESS	2801 86TH ST.	2.3 STREET ADDRESS	
CITY- ST- ZIP	BROOKLYN NY 11223	2.4 CITY- ST- ZIP	
TITLE	D	3.1 TITLE	☐ Change ☐ Addition
NAME	MADONIA, JOSEPH	3.2 NAME	
STREET ADDRESS	436 WALKER ST.	3.3 STREET ADDRESS	
CITY- ST- ZIP	N. BABYLON NY 11704	3.4 CITY- ST- ZIP	
TITLE	ST	4.1 TITLE	☐ Change ☐ Addition
NAME	MADONIA, NICHOLAS J JR.	4.2 NAME	
STREET ADDRESS	4073 DARBY LN.	4.3 STREET ADDRESS	
CITY- ST- ZIP	SEAFORD NY 11753	4.4 CITY- ST- ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY- ST- ZIP		5.4 CITY- ST- ZIP	
TITLE		6.1 TITLE	☐ Change ☐ 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)(j), 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 this corporation or the person or persons empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if it changed, or on an attachment with an address.

SIGNATURE

[Signature]

6-10-98

CR2E034 (10/97)