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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90296 037 ***150.00

i Corporation	MEN I # KO8901 I BROKERS CORPORATION							
Principal Flace	of Business	Mailing Address				f sålien snist næsås iint æsni	i Bibli digil bibli g	(Alt Eteti (Ani
1111 KANE CONCOURSE, STE 610 BAY HARBOR FL 33154 US		PO BOX 402188 MIAMI BEACH FL 33140-0188 US			NOT WRITE IN TH	IS SPACE		
					3. Date ncorporated a 12/24/1987	or Qualifed		
2. Princip 3 Pl	lace of Business	2a. Mailing Address			4. FEI Number		Ap:	olied For
21	26				65-0027519			Applicable
Suite, /\pt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status	Desired	\$8.75 <i>∔</i> . Fee Re	
City & State	9	City & State			6. Election Campaign	Financing	\$5.00	May Be
23		28	~		Trust Fund Contrib		Added t	
Zíp	Country Zip 25 29 30		Country	ountry 8. This corporation owes Personal Property Tax.				□No
2-1	9. Name and Address of Current				10. Name and Addres		d Agent	
			81	Name				
Waserstein, Richard			82	Street A 1d	ress (P.O. Bo (Number is I	Not Acceptable)		
913 NORMANDY DR. (71ST. ST.)			02	Sileet A M	1633 (F.D. DOT NUMBER 1)	то посершью,		
MIAN	AI BEACH FL 33141		83					
			84	City		 F	85 Zip C	ode
11 Duran	to the provisions of Sections 607.0502	and 607 1609. Florida Statuto	e the above	-named cor	poration submits this staten	ent for the nurnose	of changing its	egistered
office or re	egistered agent, or both, in the State of familiar with, and a coept the obligate	Florida, Such change was au	thorized by 1	the corporati	on's board of directors. I he	ereby accept the ap	ointment as rec	istered
SIGNATURE								
40	Signature, typed or printed name of registered agen and title if applicable. (NOTE: OFFICERS AND DIRECTORS		Registered Agent	t signature req iir	ADDITIONS/CHANG	DATE SES TO OFFICERS	AND DIRECTO	IS IN 12
12.	PD OFFICERS ANI.	DELETE	1.1 TITLE	<u>-</u> -	ADDITIONATION	20 70 01110210	Change	Addition
TITLE NAME	RAIJMAN, ISSAC		1.2 NAME				_ ,	
STREET ADDRESS	AAAA KANE OONOONBOE OURE OAG		13 STREET	ADDRESS				
	BAY HARBOR FL	. 010	1.4 CITY-ST	1				ļ
CITY-ST-ZIP TITLE	VST DELETE		2.1 TITLE	-207 -			Change	Addition
NAME	-		2.2 NAME	ļ				
STREET ADDRESS			2.3 STREET ADDRESS					
CITY-ST-ZIP	BAY HARBOR FL		2.4 CITY-ST-ZIP					-
TITLE	D DELETE		31 TITLE				Change	Addition
NAME	RAIJMAN, CLARA		3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				\
CITY-ST-ZIP	BAY HARBOR FL		3.4. CITY-\$1	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	☐ Addition
NAME			4. 2 NAME	Ì				i
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			44 CITY-ST	-ZIP				
TITLE		☐ DELETE	5.1 TITLE	1			Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRE 3S			5.3 STREET					[
CITY-ST-ZIP		☐ DELETE	5.4 CITY-ST	-219			Change	Addition
TITLE		☐ DEFE IE	6.2 NAME					
NAME			6.3 STREET	ADDRESS				
STREET ADDRESS	·		6.4 CITY-ST]
CITY-ST-ZIP			0.7 On 1-31	-"				

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 unward report is fitte 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 recuired by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed or on an attachment with an address, with a lother like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR I RINTED NAME OF SIGNING OFFICE! OR DIRECTOR

april 21/99 305) 379-8785

CR2E034 (11/98)