## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 PROFIT



- COF	RPORATION Sandra B. Mort JAL REPORT Secretary of S DIVISION OF CORPO	tham tate			
DOCUI 1. Corporation	MENT # 40255   BLOCK REALTY AND DEVELOPMENT	NT CORP.			
Principal Place	e of Business Mailing Address		-		
#040 C	W 77 C4 D 0 D 460	~~.			
5948 S.W. 73 St. P. O. Box 430394 South Miami, F1. 33143 South Miami, F1. 33					
oouth .	miami, 11. 55145 South Miami, r	1,33243	3. Date Incorporated or Qualified	3a. Date of Last Repo	
2 Principal D	ace of Business 2a. Mailing Address		June 5, 1972	April 1995	5 lied For
21 5948 S. W. 73 St. 26 P.O. Box 430394			59-1455173		Applicable
Suite, Apt		<u> </u>	5. Certificate of Status Desired	\$8.75 Ad	
22	27		5. Cerancate of Status Desired	Fee Requ	Jired
City & State Sout	City & State h Miami, F1.33143 28 South Miami,	F1 332/13	6. Election Campaign Financing Trust Fund Contribution	\$5.00 M	
Z <sub>i</sub> p 24 3314	Country Zip C	Dade	8. This corporation has liability for Florida Statutes Yes		
	9. Name and Address of Current Registered Agent		10. Name and Address of New Ri	gistered Agent	
		81 Name			
Shirley Block, President  82 Street Add			ess (P.O. Box Number is Not Accepta	ole)	
5610	Twin Lake Drive	83		<del></del>	
Sout!	h Miami, F1. 33143				
		84 City		FL 85 Zip Co	ode
11. Pursuant I	o the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the	above-named corp	oration submits this statement for the	ourpose of changing its	registered
office or re agent. Lar	egistered agent, or both, in the State of Florida. Such change was authori in familiar with, and accept the obligations of, Section 607.0505, Florida S	zed by the corporati itatutes	ion's board of directors. Thereby acce	ot the appointment as re	gistered
SIGNATURE	Spirily Block	<del></del>		4-23-9	6
12.	Signature Typed or pured name of registered agent and title it applicable (NOTE Regist OFFICERS AND DIRECTORS 1:	ered Agent signature require 3.	ed when re-ristating)  ADDITIONS/CHANGES TO OFFI	(MIC	i
1111.5		1 TITLE			Addition
NAME		2 NAME			
STREET ADDRESS		3 STREET ADDRESS			-
CITY-ST-ZIP		CITY-ST-ZIP		Change	Addition
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CITY-ST ZIP		CITY-ST-ZIP			
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NAME	33	2 NAME			
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CITY - ST - 71P TITU		1 CITY-ST-ZIP		Change	Addition
NAME		2 NAME		<u></u>	
STREET ADDRESS		STREET ADDRESS			6
CITY-ST-ZIP		CITY-ST-ZIP			2
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb further cer made und		P NAME  3 STREET ADDRESS 4 CITY-ST-ZIP d and does not qua nnual report is true a or trustee empowere	and accurate and that my signature sh	119 07(3)(k), Florida Sta all have the same legal	atutes. I effect as if

4-23-96 (305)661-6023