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

CITY-ST-ZIP

STREET ADDRESS CITY-ST-ZIP

TITLE

NAME

**FILED** Mar 09 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #**1. Corporation Name 404891 (4) MIDTOWN REALTY, INC Mailing Address Principal Place of Business 12805 S.W. 84TH AVENUE ROAD 12805 S.W. B4TH AVENUE ROAD MIAMI FL 33156 MIAM! FL 33156 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/13/1972 2. Principal Place of Business 2a. Mailing Address Applied For 59-1443849 Not Applicable 21 Suite, Apt. #, etc Suite, Apt #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Country Zip Country Ζırı 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent **B1** Name **DOMINGUEZ, CARLOS** 12805 SW 84TH AVE RD 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 83 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statules, 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. (NOTE: Registered Agent signature required when reinstaling) Signature, typed or printed hame of requirered agent and title if apple able. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE \_\_ Change Addition TITLE DOMINGUEZ, CARLOS 1.2 NAME CR2E034 NAME 10341 S.W. 109TH ST. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 City - ST - ZiP Addition DELETE Change TITLE 21 TITLE 22 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CiTY-ST-ZIP DELETE Addition 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-\$1-ZIP DETETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change \_\_\_ Addition 5.1 TITLE TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS

14. Thereby cortify that the information supplied with this filling 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 supplied with this filling 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 of supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or rustee empowered to excite 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 arm shring with an address. 3/3/gs 305-253-5600 SIGNATURE:

DELETE

5.4 CITY-ST-ZIP

6 4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS Change

Addition