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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 479250

(3)

GLOBAL REALTY INVESTORS, INC.

FILED	
May 02 1997 8:00am	1
Secretary of State	

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P.O. BOX 4025 MIAMI BEACH US	66	P.O. BOX 402566 MIAMI BEACH FL 33140-0566 US						
					3. Date Incorporated or Qualified 07/16/1975	3a. Date o		Report
	ace of Business	2a, Mailing Address			4, FEI Number 59-1607260			oplied For
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		<u> </u>				ot Applicable  Additional
22		27			5. Certificate of Status Desired		•	equired
City & State	9	City & State			6. Election Campaign Financing		\$5.00	May Be
23		28	·		Trust Fund Contribution		Added	to Fees
Zip	Country 25	Zip	Country 30	i	8. This corporation has liability for in	ntangible tax Yes 🔲 N		. 199.032,
24	9, Name and Address of Current	29     Registered Agent	[30]		Florida Statutes  10. Name and Address of New Rec			
WIN	KELMAN, CHARLES L.		81	Name		,		
	COLLINS AVE 90		82	Street Ad	dress (P.O. Box Number is Not Acceptable			
	MI BEACH FL 33140				areas (1.0. Box Harriser is Hat Acceptable			
			83	ļ				
•			84	City		<b>-</b> 1 8	35 Zip	Code
dd Dimeriant	to the previous of Postions COZ DEOC	and CO2 SEGO Florido Piet.	des the share		orporation submits this statement for the parties acceptation's board of directors. I hereby accept	FL  °		
SIGNATURE	Signature, typed or printed name of registered ager OFFICERS AND	It and title if applicable. (NO			quired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE		
TITLE	P	DELETE	1.1 THLE		ADDITIONS/CHANGES TO OFFIC		Change	Addition
NAME	WINKELMAN, CHARLES L.	-	1.2 NAME	İ		,	* · · · · · · · · · · · · · · · · · · ·	<b>C3</b>
STREET ADDRESS	5600 COLLINS AVE 90		1.3 STREE	ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33140		1.4 CITY-1	ST-ZIP				
TITLE	ST	DHETE	2.1 TITLE	1			Change	Addition
NAME	SCOTT, AIDA R.		2.2 NAME	}				
STREET ADDRESS	1788 FAIRHAVEN PLACE MIAMI FL		2.3 STREE					
CITY-ST-ZIP TITLE	MINNI FL	DELETE	2 4 CITY- 3.1 TIYLE	S1 - ZIP			Change	Addition
NAME			3.2 NAME	1			Ondingo	
STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			3. <b>≬</b> . C∏Y-	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4.:2 NAME					
STREET ADDRESS				I ADDRESS	·			
CITY-ST-ZIP		DELETE	4.4 CITY-1	ST - ZIP			Change	Addition
TITLE NAME		C) DEECH	5.N TITLE 5.P NAME			L	CHAIGE	Addition
STREET ADDRESS				I ADDRESS				
CITY-ST-ZIP			54 CITY-					
TITLE		DELETE	6.1 TITLE	21 - 11			Change	Addition
NAME			62 NAME				-	
STREET ADDRESS			I .	ADDRE'SS				
CITY-ST-ZIP			6,4 CITY-	S1-ZIP				
44 Ldo herel	by cartify that the information supplied	with this filing does not alla	lify for the ex	emotion etal	ed in Section 119 07(3)(i) Florida Statutes	. I further or	artify that	the

information indicated on this annual report or supplies with unit ming does not quality 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 eath; that I am an officer or director of the corporation or the receiver or trustee ampowered 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 proddress.

CIONATURE.

es Ilvinkelman

4-28-97 305 361 149.