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May 05 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 482245

(8)

1. Corporation Name
FENSTER REALTY, INC.

Principal Place of Business
16830 NW 18TH AVENUE
NORTH MIAMI BEACH FL 33182
US

Mailing Address
16830 NE 18TH AVENUE
NORTH MIAMI BEACH FL 33182-3108
US



3. Date Incorporated or Qualified
08/11/1975

3a. Date of Last Report
04/26/1996

4. FEI Number
59-1618340

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

29 Country

9. Name and Address of Current Registered Agent

FENSTER, JEFFREY M.
8751 W. BROWARD BLVD, #307
PLANTATION FL 33334

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PV ☒ DELETE
NAME FENSTER, JEAN
STREET ADDRESS 16830 NE 18TH AVENUE
CITY- ST- ZIP NORTH MIAMI BEACH FL

TITLE ☒ DELETE
NAME ~~JEFFREY M. FENSTER~~
STREET ADDRESS ~~SAME AS ABOVE~~
CITY- ST- ZIP

TITLE ☒ DELETE
NAME ~~JEFFREY M. FENSTER~~
STREET ADDRESS ~~SAME AS ABOVE~~
CITY- ST- ZIP

TITLE ☒ DELETE
NAME ~~JEFFREY M. FENSTER~~
STREET ADDRESS ~~SAME AS ABOVE~~
CITY- ST- ZIP

TITLE ☒ DELETE
NAME ~~JEFFREY M. FENSTER~~
STREET ADDRESS ~~SAME AS ABOVE~~
CITY- ST- ZIP

TITLE ☒ DELETE
NAME ~~JEFFREY M. FENSTER~~
STREET ADDRESS ~~SAME AS ABOVE~~
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME ~~JEFFREY M. FENSTER~~
1.3 STREET ADDRESS ~~SAME AS ABOVE~~
1.4 CITY- ST- ZIP

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME ~~JEFFREY M. FENSTER~~
2.3 STREET ADDRESS ~~SAME AS ABOVE~~
2.4 CITY- ST- ZIP

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME ~~JEFFREY M. FENSTER~~
3.3 STREET ADDRESS ~~SAME AS ABOVE~~
3.4 CITY- ST- ZIP

4.1 TITLE ☒ Change ☐ Addition
4.2 NAME ~~JEFFREY M. FENSTER~~
4.3 STREET ADDRESS ~~SAME AS ABOVE~~
4.4 CITY- ST- ZIP

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME ~~JEFFREY M. FENSTER~~
5.3 STREET ADDRESS ~~SAME AS ABOVE~~
5.4 CITY- ST- ZIP

6.1 TITLE ☒ Change ☐ Addition
6.2 NAME ~~JEFFREY M. FENSTER~~
6.3 STREET ADDRESS ~~SAME AS ABOVE~~
6.4 CITY- ST- ZIP

14. I do 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 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 the corporation or the receiver or trustee empowered 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 an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/96)