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 # 528404

(7)

Mailing Address

FIRST MIAMI REALTY, INC.

Principal Place of Business

FILED Apr 18 1997 8:00am Secretary of State

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3512 DEL PARO CHELSEA PLAC CAPE CORAL F	E #113	PO BOX 1335 CAPE CORAL FL 33910-1335									
						3. Date Incorporated 02/17/1977	or Qualified		te of Last F 1/1996	eport	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number			Ar	oplied For	
21 6/3 \$	5 E. 35 TH STREET	26				<u>59-1724436</u>			No	ot Applicable	
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status	Desired		\$8.75 Additional Fee Required			
City & State 23 CHPE	CORAL FC.	City & State			6. Election Campaign Trust Fund Contrib	_	Added to Fees				
Zip Country Zip 24 33904 25 LEG 29				untry		Florida Statutes					
	'9. Name and Address of Curren	Registered Agent		1		10. Name and Addres		latered /	igent		
SEN	DRA, JOSE A.		61	Name	ENDRA JOSE	4 .					
175 FONTAINEBLEAU BLVD. MIAMI FL 33172					Street A	ndress (B.O. Box Number 4)		e)			
				84	CityC	APE CORAL		FL	85 Zip	Code 4	
11. Pursuant to the previsions 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. I am familiar with, and accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE											
<u> </u>	Figure - Typed or preited name of registered ager			d Agent	algnature r	equired when reinstating)		DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANG	ES TO OFFIC	ERS AND			
THUE Y	PTD	☐ DELETE	1	1.1 TITLE					Change	Addition	
NAME	SENDRA, JOSE A			1.2 NAME							
STHEET ADDRESS	613 SE 35TH ST.			1.3 STREET ADDRESS						ļ	
City-St-7iP	CAPE CORAL FL 33904			1.4 CiTY-ST-ZiP							
Tatuk	S L_I DELETE			2.1 TITLE					Change	Addit:on	
NAME	MARQUEZ, CARMEN			2.2 NAME							
STREET ADDRESS	175 FONTAINEBLEAU BLVD.			2.3 STREET ADDRESS						Į	
City - St - ZiF	CAPE CORAL FL 33172			2. 4 CITY - ST - ZIP							
TITLE	L_J DELETE			3.1 TITLE					Change	Addition	
NAM E			3.2 N	AME							
STREET ADDRESS			3.3 \$	TREET A	DDRESS						
CITY-ST-ZIP			3.4. 0	3.4. CITY-ST-ZIP			·····				
TITLE		■ DELETE	4.1 TI	4.1 TITLE					Change	☐ Addition	
NAME :			4. 2 N	MAME	- 1						
STREET ADDRESS			4.3 \$	TREET A	DDRESS						
C:TY+ST+ZIP			4.4 C	ITY-ST-	ZIP						
THEE	☐ DELETE			5.1 TITLE					Change	☐ Addition	
NAME			5.2 N	IAME							
STREET ADDRESS			5.3 S	TREET A	DDRESS						
City - St - ZiP			5.4 C	ITY-ST-	ZIP						
Tille		DELETE	61T)	ITLE					Change	☐ Addition	
NAME			62 N	IAME							
STREET ADDRESS.			6.3 5	TREET A	DDRESS						
CITY - ST. ZIP				TY-ST							

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 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 chapter 607 or on an attachment with an address.

SIGNATURE:

E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/97

941-5497757