

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 03, 2003 8:00 am
Secretary of State

02-03-2003 90147 008 ***150.00

DOCUMENT # 549642

1. Entity Name
J.I. KISLAK REALTY CORP.



Principal Place of Business
**C/O HOWARD J. BRAFMAN, ESQ.
7900 MIAMI LAKES DR W.
MIAMI LAKES FL 33016-5897**

Mailing Address
**C/O HOWARD J. BRAFMAN, ESQ.
7900 MIAMI LAKES DR W.
MIAMI LAKES FL 33016-5897**

22000693



2. Principal Place of Business
7900 MIAMI LAKES DR W

3. Mailing Address
7900 MIAMI LAKES DR W

Suite, Apt. #, etc.
ATTN CORP TAX

Suite, Apt. #, etc.
ATTN CORP TAX

☐ CHECK HERE IF MAKING CHANGES

City & State
MIAMI LAKES, FL

City & State
MIAMI LAKES, FL

4. FEI Number
59-1770619

Applied For
☐ Not Applicable

Zip
33016

Country

Zip
33016

Country

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RODRIGUEZ, CHRISTY
7900 MIAMI LAKES DR. W.
MIAMI LAKES FL 33016**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State**

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	S LUBOW, CHERYL 7900 MIAMI LAKES DR W MIAMI LAKES FL 33016	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CDP KISLAK, JAY I 7900 MIAMI LAKES DR W MIAMI LAKES FL 33016	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DSVT BARTELMO, THOMAS 7900 MIAMI LAKES DR WEST MIAMI LAKES FL 33016	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AV RODRIGUEZ, CHRISTY 7900 MIAMI LAKES DRIVE WEST MIAMI LAKES FL 33016	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	RODRIGUEZ, CHRISTY	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **SIGNATURE REQUIRED**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/24/2003

305-364-4106

Date

Daytime Phone #

CR2E034 (10/02)