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 # 594791

(6)

| Principal Place of Business Mailing Address 8509 HARDING AVENUE 9509 HARDING AVENUE SURFSIDE FL 33154 SURFSIDE FL 33154-2501 | MARDING REALTY, INC. | | |
|---|-----------------------------|-----------------|--|
| 8509 HARDING AVENUE 8509 HARDING AVENUE | | | |
| | Principal Place of Business | Mailing Address | |
| | | | |
| | | | |

FILED Jan 31 1997 8:00am Secretary of State



| OUNFOIDE TE | 33134 | OUTH GIPE TE SUITY FOUT | | | | | | | |
|--|---|---|-----------------------|-----------------|----------------------|--|-----------------------|----------------------------|----------------------------|
| | | | | | | 3. Date Incorporated or Qualified 12/18/1978 | 3a, Dat 04/1 | te of Last Re 5/1996 | eport |
| 2. Principal Place of Business 2a. Mailing Address | | | | | *********** | 4. FEI Number | <u> </u> | Ap | plied For |
| 2126 | | | | | | 59-1874805 | | No | t Applicable |
| Suite, Apt | . #, etc. | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 | Additional |
| 22 | 27 | | | | | 6. Certificate or Status Desired | | Fee Re | quired |
| City & Sta | te | City & State | | | , | 6. Election Campaign Financing | | \$5.00 | May Be |
| 23 | | 28 | | | | Trust Fund Contribution | | Added t | |
| Zip | Country | Zip | Co | ountry | ' | 8. This corporation has liability for i | ntangible | tax under s | 199.032, |
| 24 | 25 | 29 | 30 | | | |] Yes [| | |
| | g, Name and Address of Curr | ent Registered Agent | | | | 10. Name and Address of New Re | gistered A | gent | |
| SM | ITH, JOSE | | | 81 | Name | | | | |
| | AINSLEY BUILDING | | | 82 | Ctroot Addr | ress (P.O. Box Number is Not Acceptab | lo) | | |
| | MI FL 33132 | | | 102 | Street Addr | ess (P.O. pox Number is Not Acceptab | ie) | | |
| **** | | | | 83 | | | | | |
| | | | | 84 | City | | | 85 Zip (| Code |
| | | | | 1. | J.,, | | FL | | |
| office or agent. I: | registered agent, or both, in the Sta am familiar with, and accept the obt | suz and 607, 1506, Florida Statu ite of Florida. Such change was igations of, Section 607,0505, F | authoriz Iorida St | ed by atutes | the corporat s. | poration submits this statement for the p tion's board of directors. I hereby accep | orpose of the appo | changing it as themtain | s registered registered |
| | Signature, hyped or printed name of registered a | | TE Register | red Age | ent signature røquir | red when reinstating) | DATÉ | | |
| 12. | | IND DIRECTORS | 13 | 3 | | ADDITIONS/CHANGES TO OFFIC | ERS AND | | |
| TITLE | PD | DELETE | 1.1 | TITLE | | | | Change | Addition |
| NAME | BIGELMAN, ANITA | | 1.2 | NAME | - | | 1 | | |
| STREET ADDRESS | 9509 HARDING AVENUE | | 1.3 | STREET | ADDRESS | | | • | |
| CITY-ST-2IP | SURFSIDE FL | | 1.4 | CITY-S | ST-ZIP | | | | |
| TITLE | STD | DELETE | 2.1 | TITLE | | | | Change | Addition |
| NAME | WASERSTEIN, MARTA | | 2.2 | NAME | | | | | |
| STREET ADDRESS | 9509 HARDING AVENUE | | 2.3 | STREET | ADDRESS | | | | |
| CITY - ST - ZIP | SURFSIDE FL | | 1 | CITY- | | MY ; | | | |
| TITLE | | DELETE | | TITLE | V. L. | | | Change | Addition |
| NAME | | | | NAME | | | | - ' | |
| STREET ADDRESS | | | 1 | | ADDRESS | | | | |
| | | | | | | | | | |
| CITY - S1 - ZIP TITLE | | ☐ DELETE | | CITY-! | 31-411 | | | Change | Addition |
| | | □ Milli | | | | | | rm cistude | had ridonoli |
| NAME | | | - | NAME | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | CITY - S | T-ZIP | | | T 66 | 4 2 200 - |
| TITLE | | [] DELETE | | TITLE | | | | ☐ Change | Addition |
| NAME | | | 5.2 | NAME | | • | | | |
| STREET ADDRESS | | | 5.3 | STAEET | ADDRESS | | | | |
| CITY-ST-ZIP | | | 5.4 | CITY - S | ST-ZIP | | | | |
| TITLE | | DELETE | 6.1 | TITLE | | | | Change | Addition |
| NAME | | | 6.2 | NAME | | • | | | |
| STREET ADORESS | } | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | CITY-5 | | | | | |
| | aby postily that the information supp | lied with this filing does not aug | | | | d in Section 119 07/3\(ii) Florida Statute | e I further | continut bat | the |

information indicated on this annual report or supplied with this filing 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 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 i) changed, or on an attachment with an address.

SIGNATURE:

865-9811

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