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Mar 31 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 596597 (5)

1. Corporation Name
ALMIKE REALTY & MANAGEMENT, INC.

Principal Place of Business
~~3378 NW 33 WAY~~
BOCA RATON FL 33431

Mailing Address
~~3378 NW 33 WAY~~
BOCA RATON FL 33431-6352



3. Date Incorporated or Qualified 12/07/1978
3a. Date of Last Report 03/12/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	65-0075161	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27		
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28		
Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	Yes No
24	25		
	29		
	30		

9. Name and Address of Current Registered Agent

KLASFELD, ILENE
701 NW 13TH ST.
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

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]* DATE *February 24, 1997*

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V	1.1 TITLE	
NAME	KLASFELD, JON	1.2 NAME	
STREET ADDRESS	3378 NW 33 WAY 701 N.W. 13th St.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 00000 Boca Raton, FL	1.4 CITY-ST-ZIP	
TITLE	PSD	2.1 TITLE	
NAME	KLASFELD, ILENE	2.2 NAME	
STREET ADDRESS	3378 NW 33 WAY 701 N.W. 13th St.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON, FL 00000 33486	2.4 CITY-ST-ZIP	
TITLE	V	3.1 TITLE	
NAME	KLASFELD, ALAN	3.2 NAME	
STREET ADDRESS	3378 NW 33 WAY 701 N.W. 13th St.	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33486	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/24/97 368-5555
Date Daytime Phone #

CR2E034 (9/96)