FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT **1996**

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

FILED
May 01, 1996 08:00 A
Secretary of State

DOCUMENT # **656142** **(7)**

1. Corporation Name
J/L REALTY, INC.

Principal Place of Business	Mailing Address
~~HIXSON. MARIN. POWELL & DE SANCTIS. P.A.~~ ~~16100 N.E. 16TH AVE., SUITE B~~ ~~N. MIAMI BEACH FL 33162~~	HIXSON. MARIN. POWELL & DE SANCTIS. P.A. 16100 N.E. 16TH AVE., SUITE B N. MIAMI BEACH FL 33162

3. Date Incorporated or Qualified	3a. Date of Last Report
02/07/1980	04/07/1995

2. Principal Place of Business	2a. Mailing Address
21 120 Laurel Rd	26
22 Suite, Apt. #, etc	27 Suite, Apt #, etc.
23 City & State Hollywood Fl	28 City & State
24 Zip 33021 / 25 Country USA	29 Zip / 30 Country USA

4. FEI Number **59-1977367** ☐ 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

9. Name and Address of Current Registered Agent

LEHRER, SYLVIA
120 LAUREL RD.
HOLLYWOOD FL 33021

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 ______ DATE ______
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DV	☐ DELETE	1.1 TITLE	☐ Change ☑ Addition
NAME	LEHRER, SYLVIA		1.2 NAME	
STREET ADDRESS	120 LAUREL RD.		1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL 0		1.4 CITY-ST-ZIP	33021
TITLE	ST	☐ DELETE	2.1 TITLE	☐ Change ☑ Addition
NAME	LEHRER, JACQUES		2.2 NAME	
STREET ADDRESS	120 LAUREL RD.		2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD, FL L 0		2.4 CITY-ST-ZIP	33021
TITLE		☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: X [signature] Pres 4/29/96
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Title — Date — Phone

CR2E034 (12/95)