

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Aug 24 1998 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 678316  
1. Corporation Name

TURNBERRY REALTY CORP.

Principal Place of Business

Mailing Address

19735 Turnberry Way  
Aventura, FL 33180

19735 Turnberry Way  
Aventura, FL 33180

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
7/11/80

2. Principal Place of Business	2a. Mailing Address
21 19501 Biscayne Blvd.	26 19501 Biscayne Blvd.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 Suite 400/Attn: Legal Dept.	27 Suite 400/Attn: Legal Dept.
City & State	City & State
23 Aventura, FL	28 Aventura, FL
Zip	Zip
24 33180	29 33180
Country	Country
25 USA	30 USA

4. FEI Number  
59-2025568

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

R.J. Parello  
2875 N.E. 191 Street  
Suite 400  
Aventura, FL 33180

81 Name  
Mario A. Romine  
82 Street Address (P.O. Box Number is Not Acceptable)  
19501 Biscayne Blvd.  
83 Suite 400  
84 City  
Aventura FL 85 Zip Code  
33180

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

*Mario A. Romine*  
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

7-14-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	T <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President/Secretary/Treas. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	George Berlin	1.2 NAME	George Perez
STREET ADDRESS	19735 Turnberry Way	1.3 STREET ADDRESS	19501 Biscayne Blvd., Suite 400
CITY-ST-ZIP	Aventura, FL	1.4 CITY-ST-ZIP	Aventura, FL 33180
TITLE	PVS/D <input type="checkbox"/> DELETE	2.1 TITLE	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	James Joseph Rumpza	2.2 NAME	James Joseph Rumpza
STREET ADDRESS	19735 Turnberry Way	2.3 STREET ADDRESS	19501 Biscayne Blvd., Suite 400
CITY-ST-ZIP	Aventura, FL	2.4 CITY-ST-ZIP	Aventura, FL 33180
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	Eugene Kessler
STREET ADDRESS		3.3 STREET ADDRESS	19501 Biscayne Blvd., Suite 400
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Aventura, FL 33180
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	500002624285
STREET ADDRESS		5.3 STREET ADDRESS	-08/25/98--01017--046
CITY-ST-ZIP		5.4 CITY-ST-ZIP	***550.00
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 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.

CR2E034 (10/97)

8-24

7/15/98

(205) 933-1200