

APPROVED
AND
FILED

95 MAY -1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 683812 (2)
1. Corporation Name
RICHELIEU TOWERS (KENNEDY), INC.

Principal Place of Business	Mailing Address
600 EEE MULLEN PA 1000 BISCAYNE BLVD MIAMI BEACH FL 33139	600 EEE MULLEN PA 1000 BISCAYNE BLVD MIAMI BEACH FL 33139

2. Principal Place of Business		2a. Mailing Address	
21	R. Abe Blankenstein	26	c/o Sanford N. Reinhard
State, Apt. #, etc.		State, Apt. #, etc.	
22	1183 A. Finch Ave, W	27	2875 N.E 191st Str, #404
City & State		City & State	
23	Downsview, Ontario	28	N. Miami Beach
Country		Country	
24	M3J-2G2	29	33180
25	Canada	30	Florida

DO NOT WRITE IN THIS SPACE		
3. Date Incorporated or Qualified 09/24/1980	3a. Date of Last Report 03/14/1994	
4. FEI Number 59-2041496	☐ 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. Does corporation have liability for federal tax on order of ☐ Yes ☒ No Florida Statutes ☐ Yes ☒ No		
10. Name and Address of New Registered Agent		

9. Name and Address of Current Registered Agent	
01	Name San
02	Street Address 287
03	Sui
04	City N.

10. Name and Address of New Registered Agent:
ford N. Reinhard, P.A.
 (P.O. Box Number is Not Acceptable)
5 N. E. 191st Street
ate 404
Miami Beach

FL 85 33180

11. Pursuant to the provisions of Sections 607, 608, and 609, 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. Thereby accept the appointment as registered agent I am familiar with and accept the obligations of Section 609, Florida Statutes.

SIGNATURE

12.	OFFICERS AND EMPLOYEES
TITLE NAME STREET ADDRESS CITY ST ZIP	PD BLANKENSTEIN, ROMAN A 1183-A FINCH AVE. W. #11 DOWNSVIEW, ONTARIO
TITLE NAME STREET ADDRESS CITY ST ZIP	D FIALKOV, JOSEPH 1183-A FINCH AVE. W. #11 DOWNSVIEW, ONTARIO
TITLE NAME STREET ADDRESS CITY ST ZIP	
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TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	
TITLE NAME STREET ADDRESS CITY ST ZIP	

13.	ADDITIONAL CHANGES TO OFFICES AND OFFICE PERSONNEL	
1.1 TITLE	☐ Change	☐ Addition
1.2 NAME		
1.3 OFFICE ADDRESS		
1.4 CITY, ST, ZIP		
2.1 TITLE	☐ Change	☐ Addition
2.2 NAME		
2.3 OFFICE ADDRESS		
2.4 CITY, ST, ZIP		
3.1 TITLE	☐ Change	☐ Addition
3.2 NAME		
3.3 OFFICE ADDRESS		
3.4 CITY, ST, ZIP		
4.1 TITLE	☐ Change	☐ Addition
4.2 NAME		
4.3 OFFICE ADDRESS		
4.4 CITY, ST, ZIP		
5.1 TITLE	☐ Change	☐ Addition
5.2 NAME		
5.3 OFFICE ADDRESS		
5.4 CITY, ST, ZIP		
6.1 TITLE	☐ Change	☐ Addition
6.2 NAME		
6.3 OFFICE ADDRESS		
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 Sections 105(f)(2)(C)(i), Florida Statutes. I further certify that the information indicated by the original 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 by statute to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of the report or as an attachment to any address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

R. D. BLANKENSTEIN

APR 12, 1995 44-665-9711
Date Deposition Made