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

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jan 24 1997 8:00am Secretary of State

DOCUMENT # 697483	(6)		
ROSE GORDON REALTY, INC.	•	*	

Principal Prace of Business Mailing Address 6400 SW 50TH ST. 6400 SW 50TH ST. MIAMI FL 33155 MIAMI FL 33155-6110 3. Date Incorporated or Qualified 3a. Date of Last Report 07/31/1981 01/29/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-2111124 Not Applicable 21 26 Suite, Apt. #, etc Suite, Apt #, etc. \$8.75 Additional X 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country B. This corporation has liability for intangible tax under s. 199.032, Yes ☐ No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name CHEPENIK, STEPHEN 11800 SW 67TH COURT 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 83 84 City 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.

COMMUNICATION									
SIGNATURE	Signature, hyped or partition raine of registered agent and life of appropri	ole. (NOTE: Ri	egistered Agent signature	required when reinstating)	DATE				
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE		DELETE	1.1 TITLE		☐ Change	☐ Addition			
NAME	GORDON, ROSE		1.2 NAME]			
STREET ADDRESS	6400 SW 50TH ST.		1.3 STREET ADDRESS			ł			
CITY - ST - ZIP	MIAMI FL		1.4 CITY - ST - ZIP						
TOLE	DP	DELETE	2.1 TITLE		☐ Change	Addition			
NAME	GORDON, ROSE		2.2 NAME						
STREET ADDRESS	8400 SW 50TH ST.		2.3 STREET ADDRESS						
CHTY - ST - ZIP	MIAMI FL	-	2 4 CITY-ST-ZIP						
TITLE	\$	DELETE	3.1 TITLE		☐ Change	☐ Addition			
NAME	CHEPENIK, STEPHEN		3.2 NAME						
STREET ADDRESS	11800 SW 67TH CT.		3.3 STREET ADDRESS						
CITY - ST - ZIP	MIAMI FL		3.4 CITY-ST-ZIP						
TITLE		DELETE	4.1 TITLE		☐ Change	Addition			
NAME			4. 2 NAME						
STREET ADDRESS			4.3 STREET ADORESS			1			
CITY - ST - ZIP			44 CITY-ST-ZIP						
TITLE		☐ DELETE	5 1 TITLE		☐ Change	Addition			
NAME			52 NAME						
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY - ST - ZIP						
TITLE		DELETE	61 TITLE		Change	Addition			
NAME			6.2 NAME			Ì			
STREET ADDRESS			6.3 STREET ADDRESS						
CITY - S1 - 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

SIGNATURE:

CR2E034 (9/96)