#### 2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

### DOCUMENT # F10651

1. Entity Name F & B REALTY, INC.



Principal Place of Business

ONE SOUTHEAST THIRD AVENUE

SUITE 2130 MIAMI, FL 33131

Mailing Address

ONE SOUTHEAST THIRD AVENUE

**SUITE 2130** 

MIAMI, FL 33131

## **FILED** Apr 02, 2004 08:00 AM Secretary of State



### DO NOT WRITE IN THIS SPACE

03182004 No Chg-P CR2E034 (10/03)

4. FEI Number 57-0691094

Applied For Not Applicable

5. Certificate of Status Desired \_ \_ \_

\$8.75 Additional

6. Name and Address of Current Registered Agent

COPROLITE CORPORATION ONE SE THIRD AVENUE, SUITE 2130 SUNTRUST INTERNATIONAL CENTER MIAMI, FL 33131

# DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE					
Signature, typed or printed name of registered egent and site it applicable. (NOTE. Registered Agent signature required when reinstating)  DATE					
After May 1, 2004 Fee will be \$550.00		Election Campaign Financi     Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	U00000101468 
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD FRANKEL, MELVIN F 2127 BRICKELL AVENUE, APT. 1402 MIAMI, FL 33129				
TITLE NAME STREET ADDRESS CITY+ST-ZIP	SVD BLASS, STEPHEN A 3015 GRANADA BLVD CORAL GABLES, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ABDRESS CITY-ST-ZIP					•
TITLE NAME STREET ADDRESS CUTY-ST-789					

12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. Hurther certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under path; 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR