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

officer or director of the Block 12 or Block 13

Mar 26 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State **1998** DIVISION OF CORPORATIONS DOCUMENT # F48037 (8) **BOULTON & GIL REALTY, INC.** Principal Place of Business Mailing Address 2210 WEST 10TH COURT 6121 CORAL WAY HIALEAH FL 33010 MIAMI FL 33155 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/04/1981 2. Principal Place of Business 2a. Mailing Address Applied For Not Applicable 21 26 59-2572316 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes ∏ No 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DAVIDSON, PAMELA 6121 CORAL WAY 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33155** 63 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRFCTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition TITLE DELETE 1.1 TITLE NAME CACCIAVILLANI, RAFAEL 1.2 NAME R2E034 4390 SW 14 ST. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 City - ST- ZIP DELETE Change ☐ Addition 2.1 TITLE T171 F DAVIDSON, PAMELA NAME **2.2 NAME** 6121 CORAL WAY 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2. 4 CITY- ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE Change Addition TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST- ZIP CITY-ST-ZIP Addition DELETE Change TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY+ST-ZIP 4.4 City-St-7IP DELETE 00000247014Unange TITLE 5.1 TITLE , -03/27/98--01010--030 NAME 5.2 NAME ***150.00 STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY - ST- ZIP DELETE 6.1 TITLE +1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 City-St-ZiP CITY-ST-ZIP his filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information initial report is fure and accurate and that my signature shall have the same legal effect as if made under oath; that I am an error trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that the indicated on this annual ormation supplied report or supplemen

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