FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

G16481

(5)

RANLIN PROPERTIES, INC.

Princi	ipal Place of Business	Mä	Mailing Address									
% CY PROPERTIES, INC. 4651 SHERIDAN ST#905			% CY PROPERTIES, INC. 4651 SHERIDAN ST. #305									
Н	HOLLYWOOD FL 33021		HOLLYWOOD FL 33021			3. Date Incorporated or Qualified 12/14/1982 3a. Date of Last Report 06/06/1995						
2 Pr	rincipal Place of Business	2a.	Mailing Address		***		4.	FEI Number		Applied For		
	Tropo o zata	26						59-2241830		Not Applicable		
Si	uite, Apt. #, etc.	27	Suite, Apt. #, etc.				5. Certificate of Status Desired			\$8.75 Additional Fee Required		
Ci 23	City & State		City & State				6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Z ₁	p Cour		Ζιρ	Country 30	Ÿ		8.	This corporation has liability for Florida Statutes Yes	ntangible X No	tax under s 199.032,		
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent						
				81	Ī	Name						
CY PROPERTIES, INC. SUITE 305 4651 SHERIDAN STREET						Street Addres	ddress (P.O. Box Number is Not Acceptable)					
	HOLLYWOOD FL 33021			84	+	City				85 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. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

84 City

12.	OFFICERS AND DIRE	CTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD	DELETE.	1.17065	Change Addition
NAMÉ	YOGEL, LARRY D.		1.2 NAMÉ	
STREET ADDRESS	342 GRAYS LANE		1 3 STREET ADDRESS	
CITY-ST-ZIP	HAVERFORD PA		1.4 CHTY - ST - ZIP	
TITLE	PD	Delete	2 1 THILE	☐ Change ☐ Addition
NAME	CHODOROW, JEFFREY R.		2.2 NAME	
STREET ADDRESS	19355 TURNBERRY WAY		2.3 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BEACH FL		2.4 CITY - S1 - 7/P	
TIFLE		DELETE	3 1 DTLE	Change Addition
NAME			3 2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY - ST - ZIP			3.4.0/TY - ST - ZIP	
TITLE		☐ DELETE	4 1 11"LE	Change Additi
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADOPESS	
DITY-ST-ZIP			4.4.CHY-SI-ZIP	
TITLE		☐ DELETE	5 1 TITLE	☐ Change ☐ Additi
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CITY - ST - ZIP	
TITLE		☐ DELETE	6 1 TITLE	☐ Change ☐ Addit
NAME			6.2 NAME	
STREET ADORESS	/		6.3 STREET ADDRESS	
CITY - ST - ZIP	/		6.4 CHTY - ST - ZIP	The state of the s

pliation surpried with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further fitted 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 lector of the corporation or transferied or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 13 if changed, or on an additional with an address 14. I do hereby certify that the information certify that the information oath; that I am an officer or dist. appears in Block 12 d

SIGNATURE:

TURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR

CR2E034 (12/95)