

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



FLORIDA DEPARTMENT OF STATE
 Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # **G87106** (2)

1. Corporation Name

NIRIT REALTY, INC.



Principal Place of Business

Mailing Address

20191 E. COUNTRY CLUB DR.
 MEZZANINE LEVEL
 N. MIAMI BCH. FL 33180
 US

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 MEZZANINE LEVEL
 N. MIAMI BCH. FL 33180
 US

3. Date Incorporated or Qualified
12/29/1983

3a. Date of Last Report
01/18/1995

2. Principal Place of Business

2a. Mailing Address

21 **20801 Biscayne Blvd**

26 **20191 EAST COUNTRY CLUB DR**

4. FEI Number

59-2367121

Applied For
 Not Applicable

22 Suite, Apt #, etc.
Suite 303

Suite, Apt #, etc.

27 **1002**

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State
North Miami Beach, FL

City & State

28 **North Miami Beach, FL**

6. Election Campaign Financing
 Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip
33180

Country
U.S.A.

29 Zip
33180

Country
USA

8. This corporation has liability for intangible tax under s. 199.039, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WELKOVITZ, NIRIT
 20191 E. COUNTRY CLUB DR.
 MEZZANINE LEVEL
 NORTH MIAMI 33180**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Signature box for principal officer or director (if applicable)

(NOTE: Registered Agent signature required when registering)

Date

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE
	PD WELKOVITZ, NIRIT	20191 E COUNTRY CLUB DR	NORTH MIAMI FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY-ST-ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13. I changed on an attachment with an address.

SIGNATURE:

Nirit Welkowitz
 Nirita WELKOVITZ

June 6, 1996

305 931 8377

CR2E034 (3/96)