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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G87106

NIRIT REALTY, INC.

Principal Place of Business

**SIGNATURE:** 

(2)

Maring Address

**FILED** Jan 17 1997 8:00 am Secretary of State



20801 BISCAYNE BLVD. 303		20191 EAST 0 1002								
NORTH MIAMI US	BEACH FL 33180	NORTH MIAMI US	NORTH MIAMI BEACH FL 33180-3018 US			Date Incorporated or Qualified     12/29/1983	ate of Last Report			
2. Principal P	lace of Business	2a. Mailing Ac	ddress	~ ~ ~ ~ ~ ~			4. FEI Number	1,		pplied For
1		26					59-2367121		No	ot Applicable
Suite, Apt 2	#, etc.	Suite, Apt	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & State	0	City & Sta	te				6. Election Campaign Financing		\$5.00	May Be
3		28		,			Trust Fund Contribution	<u>. Ц</u>	Added	to Fees
Z•p −1	Country				ntry		<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No			
4	25   g. Name and Address of Cu	29		30			Florida Statutes  10. Name and Address of New Re		<del>.</del>	
WEI	KOVITZ, NIRIT	inent negistered Agei			81	Name	IV. Name and Address of Herr he	Altroide L	(your	ш
	91 E. COUNTRY CLUB DR.									
	ZANINE LEVEL				82	Street Ado	dress (P.O. Box Number is Not Acceptable)			
	RTH MIAMI 33180			-	83					
1101	(III MINAMI OO IOO									
					84	City		FL	85 Zip (	Code
agent. La SIGNATURE	ળો lamiliar with, and accept the c	bligations of Section 6	07.0505 Flo	orida Statu	ites	i.	ition's board of directors. I hereby accep		Jii kirieni as	registered
12.	Signature typestory is a connecting steel OFFICERS	AND DIRECTORS	(NOTE	E: Begistered	Ager	nt signature requ	aired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE FRS AND	DIRECTOR	IS IN 12
TICLE	PD	and the second of the second o	DELETE	1.1 111	LÉ		ADDITIONS/OFFANGES TO OFFIC	LING AND	Change	Addition
NAME	WELKOVITZ, NIRIT			1.2 NA						_
STREET ADDRESS	20191 E COUNTRY CLUB	DR		•		ADDRESS				
CITY -ST - 7IP	North Miami Fl			1.4 CIT						
THEE.			DELETE	2.1 TIT			***************************************		Change	Addition
NAMi				2.2 NAI	ME					
STREET ADDRESS				2.3 \$TI	REE1.	ADDRESS				
CITY \$1-ZP			· · · · · · · · · · · · · · · · · · ·	2. 4 Cf	IY-S	T-ZIP				
1-1116			DELETE	3.1 TIT	ſŧ				☐ Change	☐ Addition
NAME				3.2 NAI						
STREET ADDRESS				ŧ		ADDRESS				
CHY-S1-ZiP T.1LE			DELETE	3.4. CI 4.1 TIT		1 - 7IP			Change	Addition
NAME		<u></u>	,	4. 2 NA					- orango	L. radinoi
STREET ADDRESS						4DDRESS				
CHY-SI-Zir				4.4 CIT						
TiTLE		Ĺ	DELETE	5.1 111				<del></del>	Change	Addition
MAME				5.2 NAI	ME					
STREET ADORESS				5.3 STF	REET.	ADDRESS				
CHY-SI-ZiF		· · · · · · · · · · · · · · · · · · ·		5.4 CIT	Y - \$1	T- Z(P		**************************************		
† TLE			DELETE	6.1 111	lŧ				Change	Addition
NAME				6.2 NA						
STREET ADDRESS						ADDRESS				į
CHY-Si ZIF	ar exetily that the informative con-	unlined with the filling do	de not outli	6.4 CIT			d in Section 119.07(3)(i). Florida Statute	. Huethe-	contifu that	tho
informatio	n indicated on this annual report	or supplemental annua	a! report is tr	rue and a	ccu	rate and tha	at my signature shall have the same lega at as required by Chapter 607, Florida S	effect as	if made un	der oath: that