

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

FILED
Apr 24 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H68505 (7)
1. Corporation Name
IML REALTY CORPORATION

Principal Place of Business 1401 BRICKELL AVENUE SUITE 630 MIAMI FL 33131	Mailing Address 1401 BRICKELL AVENUE SUITE 630 MIAMI FL 33131-3503
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 07/23/1985		3a. Date of Last Report 07/05/1996	
21 Suite, Apt. #, etc.	26	27 Suite, Apt. #, etc.	28	4. FEI Number 59-2690479		Applied For Not Applicable	
22 City & State	27	27 City & State	28	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 Zip	25 Country	28 Zip	30 Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24	25	29	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent LEVENSHON, IRA M 1401 BRICKELL AVE., SUITE 630 MIAMI FL 33131				10. Name and Address of New Registered Agent			
81 Name				82 Street Address (P.O. Box Number is Not Acceptable)			
83				84 City			
85 Zip Code				FL			

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 _____ (NOTE: Registered Agent's signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PD	NAME	LEVENSHON, IRA M.	11 TITLE		Change	Addition
STREET ADDRESS	1401 BRICKELL AVE., #630			12 NAME			
CITY-ST-ZIP	MIAMI FL 33131			13 STREET ADDRESS			
TITLE	V	NAME	SANTANA, JOSE	14 CITY-ST-ZIP			
STREET ADDRESS	1401 BRICKELL AVE., #630			21 TITLE		Change	Addition
CITY-ST-ZIP	MIAMI FL 33131			22 NAME			
TITLE	S	NAME	CASTRO, ANA Y.	23 STREET ADDRESS			
STREET ADDRESS	1401 BRICKELL AVE., #630			24 CITY-ST-ZIP			
CITY-ST-ZIP	MIAMI FL 33131			31 TITLE		Change	Addition
TITLE		NAME		32 NAME			
STREET ADDRESS				33 STREET ADDRESS			
CITY-ST-ZIP				34 CITY-ST-ZIP			
TITLE		NAME		41 TITLE		Change	Addition
STREET ADDRESS				42 NAME			
CITY-ST-ZIP				43 STREET ADDRESS			
TITLE		NAME		44 CITY-ST-ZIP			
STREET ADDRESS				51 TITLE		Change	Addition
CITY-ST-ZIP				52 NAME			
TITLE		NAME		53 STREET ADDRESS			
STREET ADDRESS				54 CITY-ST-ZIP			
CITY-ST-ZIP				61 TITLE		Change	Addition
TITLE		NAME		62 NAME			
STREET ADDRESS				63 STREET ADDRESS			
CITY-ST-ZIP				64 CITY-ST-ZIP			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE _____

CR2E034 (9/96)