

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **H69654** (2)

1. Corporation Name

CLIFSEN REALTY CORP.



Principal Place of Business

99 N.W. 183RD STREET
SUITE 117
MIAMI, FL VILLAGE, FL 33169

Mailing Address

99 N.W. 183RD STREET
SUITE 117
MIAMI, FL VILLAGE, FL 33169

2. Principal Place of Business

21 19956 NW 2ND AVE
State, Apt. #, etc.

2a. Mailing Address

26 P.O. Box 694033
City & State

22 City & State

23 MIAMI FL

24 Zip Country

33169

27 City & State

28 MIAMI FL

29 Zip Country

33269

30

3. Date Incorporated or Qualified

08/05/1985

3a. Date of Last Report

02/07/1995

4. FEI Number

59-2565130

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILBERT SENS

99 N.W. 183RD STREET, STE. 117
MIAMI, FL 33169

P.O. Box 694033
MIAMI FL 33269

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 typed or printed name of registered agent, if applicable

(NOTE: Registered Agent Signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
P	SENS, CLIFFORD	99 N.W. 183RD ST. #117	MIAMI, FL 33269
VP	SENS, GILBERT	99 N.W. 183RD ST. #117	MIAMI, FL 33269

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
1.1			
1.2			
1.3			
1.4			
2.1			
2.2			
2.3			
2.4			
3.1			
3.2			
3.3			
3.4			
4.1			
4.2			
4.3			
4.4			
5.1			
5.2			
5.3			
5.4			
6.1			
6.2			
6.3			
6.4			

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CP2E034 (12/95)