

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 AM 6:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # J39114

(0)

1. Corporation Name

B.E.A.L. REALTY CORP.

Principal Place of Business

MARCO REALTY AND MANAGEMENT CO.  
6431 COW PEN ROAD  
MIAMI LAKES FL 33014-6601

Mailing Address

MARCO REALTY AND MANAGEMENT CO.  
6431 COW PEN ROAD  
MIAMI LAKES FL 33014-6601

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/23/1986

3a. Date of Last Report

04/26/1994

4. FEI Number

59-2735821

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

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

22

Suite, Apt. #, etc.

27

City & State

23

City & State

28

Zip

24

Country

25

Zip

29

Country

30

9. Name and Address of Current Registered Agent

MARCO REALTY AND MANAGEMENT CO.  
6431 COW PEN ROAD  
MIAMI LAKES FL 33014

10. Name and Address of New Registered Agent

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 and title if applicable

NOTE: Registered Agent signature required when registering.

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

PTD  
COMART, MARTIN  
6431 COW PEN ROAD  
MIAMI LAKES FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

VSD  
MELTZER, ODED T.  
6431 COW PEN ROAD  
MIAMI LAKES FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D  
SEGAUL, ROBERT M.  
351 W. TROPICAL WAY  
PLANTATION FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D  
GREENE, RICHARD S.  
560 EL DORADO PKWAY  
PLANTATION FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D  
WILENTZ, JOEL M.  
5811 SW 33 TERRACE  
FT. LAUDERDALE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D  
WILENTZ, JOEL M.  
5811 SW 33 TERRACE  
FT. LAUDERDALE FL

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

D  
WILENTZ, JOEL M.  
5811 SW 33 TERRACE  
FT. LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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\*\*\*\*\*208.75 \*\*\*\*\*208.75

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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 or in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95

305-558 3092