

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

CORPORATION  
ANNUAL REPORT  
1995



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

APPROVED  
AND  
FILED

95 MAY -1 AM 9:09

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **J66545** (1)

1. Corporation Name  
**RABIN REALTY, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business

11 N SUMMERLIN 115  
SUITE 115  
ORLANDO FL 32801

Mailing Address

11 N SUMMERLIN 115  
SUITE 115  
ORLANDO FL 32801

3. Date Incorporated or Qualified  
**04/10/1987**

3a. Date of Last Report  
**05/01/1994**

2. Principal Place of Business

21 **2281 Lee Road**

2a. Mailing Address

26 **2281 Lee Road**

4. FEI Number  
**59-2793284**

Applied For  
Not Applicable

22 Suite, Apt. #, etc.  
**Suite 205**

27 Suite, Apt. #, etc.  
**Suite 205**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23 City & State  
**Winter Park**

28 City & State  
**Winter Park**

6. Election Campaign Financing  
Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24 **32789** 25 **Orange**

29 **32789** 30 **Orange**

8. The 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

RABIN, BENNETT L  
2910 KILGORE DRIVE  
LARGO FL 34840

**10030 59th Ave N  
St. Pete, Fla  
33708**

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 607.0503, Florida Statutes.

SIGNATURE

**Bennett L. Rabin**

Signature is (bold or printed name of registered agent and fee applicable)

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D**  
NAME **RABIN, JANET S.**  
STREET ADDRESS **11 N SUMMERLIN 115**  
CITY - ST - ZIP **ORLANDO FL**

**2281 Lee Road  
#205  
Winter Park FL  
32789**

1.1 TITLE  Change  Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

2.1 TITLE  Change  Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

3.1 TITLE  Change  Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

4.1 TITLE  Change  Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

5.1 TITLE  Change  Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

6.1 TITLE  Change  Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

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)(b), 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 in an attached filing address.

SIGNATURE:

**Janet Rabin** 4/28/95 409) 629-9675

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR