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 8:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **J88595** **(0)**

1. Corporation Name
MARQUETTE REALTY, INC.

Principal Place of Business	Mailing Address
11880 BIRD ROAD SUITE 201 MIAMI FL 33175-3573 US	11880 BIRD ROAD SUITE 201 MIAMI FL 33175-3573 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **08/14/1987**
3a. Date of Last Report: **05/01/1994**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number: **59-2841478**	Applied For / Not Applicable
21 **8701 S.W. 137th Ave.**	26 **8701 S.W. 137th Ave.**		
Suite, Apt. # etc. 22 **#300**	Suite, Apt. # etc. 27 **#300**	5. Certificate of Status Desired [X]	$8.75 Additional Fee Required
City & State 23 **Miami, FL**	City & State 28 **Miami, FL**	6. Election Campaign Financing Trust Fund Contribution [ ]	$5.00 May Be Added to Fees
Zip 24 **33183** / County 25 **USA**	Zip 29 **33183** / County 30 **USA**	8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes [X] Yes [ ] No	

9. Name and Address of Current Registered Agent

MCDAVIT, BETTY
11880 BIRD ROAD, SUITE 201
MIAMI FL 33175

10. Name and Address of New Registered Agent

81 Name: **John Mudd**
82 Street Address (P.O. Box Number is Not Acceptable): **8701 S.W. 137th Ave.**
83 **#300**
84 City: **Miami** **FL** 85 Zip Code: **33183**

11. Pursuant to the provisions of Section 607.325(4) 607.1505 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 607.325, Florida Statutes.

SIGNATURE: **John Mudd** 4/18/95
(Name of registered agent, typed or printed) (Date)

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES, OR DELETIONS	
Title	**PSD**	Title	[X] Change [ ] Addition
Name	**MUDD, JOHN**	Name	
Street Address	**11880 BIRD ROAD, SUITE 201**	Street Address	**8701 S.W. 137th Ave., #300**
City-State-Zip	**MIAMI FL**	City-State-Zip	**Miami, FL 33183**
Title	**VD**	Title	[X] Change [ ] Addition
Name	**SCHAEFER, PAUL**	Name	
Street Address	**11880 BIRD ROAD, SUITE 201**	Street Address	**8701 S.W. 137th Ave., #300**
City-State-Zip	**MIAMI FL**	City-State-Zip	**Miami, FL 33183**
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	
Title		Title	[ ] Change [ ] Addition
Name		Name	
Street Address		Street Address	
City-State-Zip		City-State-Zip	

14. To the best of my knowledge and belief, the information supplied with this report is true, complete, and accurate. I hereby certify that the information indicated on this 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 1, 2, or Block 13 if changed, or added to this report with an address.

SIGNATURE: John Mudd, President/Secretary/Director 4/18/95 (305) 383-7400
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (Date) (Daytime Phone #)

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