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

Jul 10 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # J87242 (0) KUGLER REALTY, INC. Principal Place of Business Mailing Address 20801 BISCAYNE BLVD. 20801 BISCAYNE BLVD. SUITE 417 SUITE 417 DO NOT WRITE IN THIS SPACE NORTH MIAMI BEACH FL 33180 NORTH MIAMI BEACH FL 33180 3. Date Incorporated or Qualified 08/14/1987 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 65-0007579 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 Trust Fund Contribution Added to Fees 28 Zip Zip Country Country 8. This corporation owes or has paid the current year Intangible 29 □ No 24 25 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOTTLIEB, FREDERIC I. 21301 POWERLINE ROAD 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 309 83 **BOCA RATON FL 33433** 84 City Zip Code FI 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 reinstating) CR2E034 (10/97 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE ŌD 1.1 TITLE KUGLER, GARY NAME 1.2 NAME 20801 BISCAYNE BLVD. STREET ADDRESS 1.3 STREET ADDRESS N MIAMI BEACH FL CITY - ST - 7/P 1.4 CITY-ST-ZIP ☐ DELETE 2.1 TITLE Change Addition TITLE NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY+ST-ZIF 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition Change TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-S1-ZIP 4.4 CITY - ST - ZIP DELETE 5.1 TITLE Change Addition TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS чO CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Addition 300002586483 NAME 6.2 NAME **-07**/13/98--01057--032 STREET ADDRESS 6.3 STREET ADDRESS ***150.00 6.4 CITY - ST - ZIP 14. I 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 path; 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

4-24-98

305-931-5794

GARY KUGLER

Block 12 or Block 13 if changer), or on an attachment with an address.

SIGNATURE:

Hay Kughi

FILED