

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 PM 2:19

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # J94650 (5)

1. Corporation Name

INTERBANC REAL ESTATE, INC.

Principal Place of Business

**2600 E COMMERCIAL BLVD
STE. 200
FT LAUDERDALE FL 33308
US**

Mailing Address

**2600 E COMMERCIAL BLVD
STE. 213
FT LAUDERDALE FL 33308
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

09/28/1987

3a. Date of Last Report

07/28/1994

4. FEI Number

65-0007001

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing

☐

**\$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

Suite, Apt. #, etc.

City & State

22

Zip

Country

23

2a. Mailing Address

26

Suite, Apt. #, etc.

City & State

27

Zip

Country

28

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**LIEBOWITZ, SHELDON
2600 E COMMERCIAL BLVD
STE. 200
FT LAUDERDALE FL 33308**

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 resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

**TITLE P
NAME LIEBOWITZ, SHELDON
STREET ADDRESS 2600 E COMMERCIAL BLVD, 200
CITY- ST- ZIP FT LAUDERDALE FL**

**1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP**

☐ Change ☐ Addition

**TITLE S
NAME LIEBOWITZ, MURRAY
STREET ADDRESS 2600 E COMMERCIAL BLVD, 200
CITY- ST- ZIP FT LAUDERDALE FL**

**2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

**3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

**4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

**5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP**

☐ Change ☐ Addition

**TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP**

**6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP**

☐ Change ☐ Addition

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 110.07(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 custodian 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 my address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95

Date

305-491-4511

Daytime Phone