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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K22871

M & F REALTY, INC.

Principal Place of Business		Mailing Address):::: : ::::: ::::::::::::::::::::::::::	AIRL BIBII BIRII BIRII B	, mir er er , reer	
1666 KENNEDY CAUSEWAY		1666 KENNEDY CAUSEWAY 705 CAPITAL BANK BLDG						
705 CAPITAL BANK BLDG. NORTH BAY VILLAGE FL 33141-1196		NORTH BAY VILLAGE FL 33141-1196		DO NOT WRITE IN THIS SPACE				
					3. Date Incorporated or Qua 05/09/1988	lifed		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	ied For
21 1440 Kennedy Causeway		26 1440 Kennedy Causeway		59-0686994			Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desir	ed 🔲	\$8.75 A		
Suite 300		27 Suite 300				Fee Re		
City & S ate		City & State		6. Election Campaign Finan	cing _	\$5.00 Added to		
North Bay Village, FL.		North Bay Village, FL.		Trust Fund Contribution			01663	
	Country	29 33141 3	_	У	 This corporation owes the Personal Property Tax. 	canem ye		ΣΝο
24 33141	9. Name and Address of Current		J		10. Name and Address of N	lew Regist	tered Agent	-
	J. Ivalia and Add C33 of Carrent	Itogisto ou rigani	8	Name				
FRAI	NK, MICHAEL A.				(D.O. D. N			
1666	KENNEDY CSWY.				dress (P.O. Box Number is Not Ad ennedy Causeway	ceptable)		
SUITE 705			8:	Suite				
N. B	AY VILLAGE FL 33141		`					
			84		Bay Village		FL 85 Zip C	nde 141
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State om familiar with, and accept the obligat	of Florida. Such change was aut	horized by	ve-named cor the corpora	poration submits this statement for	r the purpo accept the	ise of changing its appointment as rec	registered gistered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTic: R	egistered Age	ent signature regu	red when reinstating)	DA	ATE	
12.	OFFICERS AND	. 	13.		ADDITIONS/CHANGES TO	OFFICEF	RS AND DIRECTO	F:S IN 12
TITLE	PD	☐ DELETE	1.1 TITLE				X Change	Addition
NAME	FRANK, ROBERT R.		1.2 NAME					
STREET ADDRESS	1666 KENNEDY CSWY. #705		1.3 STREE	ET ADDRESS	1440 Kennedy Caus	seway,	#300	i
CITY-ST-ZIP	N. BAY VILLAGE FL		1.4 CITY-	ST-ZIP				
TITLE	SD	☐ DELETE	2.1 TITLE				X Change	☐ Addition
NAME	FRANK, MICHAEL A.		2.2 NAME					
STREET ADDRESS	1666 KENNEDY CSWY. #705		2.3 STRE	ET ADDRESS	1440 Kennedy Caus	seway,	#300	
CITY-ST-ZIP	N. BAY VILLAGE FL		2. 4 CITY-	ST-ZIP				
TITLE		☐ DELETE	31 TITLE				Change	☐ Addition
NAME			3 2 NAME					
STREET ADDRESS			3.3 STRE	ET ADDRESS				
CITY-ST-ZIP			3 4. CITY-					Addition
TITLE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			. 4. 2 NAME					
STREET ADDRESS			4 3 STRE	ET ADDRÉSS				
CITY-ST-ZIP		O BC: CTC	4 4 CITY-				[] Change	Addition
TITLE		☐ DELETÉ	5.1 TITLE 5.2 NAME	ļ			Change	
NAME				ET ADDRESS				
STREET ADDRESS			5.4 CITY-					ĺ
CITY-ST-ZIP		DELETE	6.1 TITLE				Change	Addition
TITLE			6 2 NAME	1				
NAME CTREET ADDRESS		•	•	ET ADDRESS				i
STREET ADDRESS			6.4 CITY-					

SIGNATURE:

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 oath; that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change, or on an attact mant with the address with all other like empowered.

SIGNATURE:

Apr. 23, 1999 305–868–4711 OF SIGNING OFFICE ? OR DIRECTOR