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

PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Secretary of State 1998 DOCUMENT # K64144 ALL FAMILY PROPERTIES, INC. Principal Place of Business Mailing Address 930 S. STATE RD. 7 810 S STATE ROAD 7 FT. LAUDERDALE FL 33317-4523 PLANTATION FL 33317 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/07/1989 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 810 S. STATE PD 7 65-0102555 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired PLANTATION Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Ζıp Country 8. This corporation owes or has paid the current year Intangible 25 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ROZENSKY, MILTON 930 S SR 7 Street Address (P.O. Box Number is Not Acceptable) 82 **PLANTATION FL 33317** 83 **B4** PLANTATION 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE X Change NAME ROZENSKY, MILTON 1.2 NAME 810 55R7 930 S SR 7 STREET ADDRESS 1.3 STREET ADDRESS PLANTATION FL PLANTATION, FL 3331 CITY-ST-7IP 14 CITY-ST-ZIP DELETE Change Addition TITLE **VPDS** 2.1 TITLE ROZENSKY, SHIRLEY NAME 22 NAME 1709 WHITEHALL DR 102 STREET ADDRESS 2.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TATLE TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE ☐ Change Addition TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change DELETE Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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, Forida Statutes, and that my 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, Forida Statutes, 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, Forida 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, Forida Statutes, I further certify that the information indicated on this annual report is supplementation.

SIGNATURE:

进入发生 经销售 不能预用的特殊

FILED

Apr 09 1998 8:00am