

Jun 18 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 1. Corporation Name L.R.J. REALTY, INC.		K65392		(8)	
Principal Place of Business 1602 ALTON RD. STE. 360 MIAMI BEACH FL 33139 US		Mailing Address 1602 ALTON RD. STE. 360 MIAMI BEACH FL 33139 US			
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country			
9. Name and Address of Current Registered Agent CABRERA, RAUL D 1602 ALTON RD. STE. 360 MIAMI BEACH FL 33139		81 Name 82 Street Address 83 City 84 State			
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation or registered agent, or both, in the State of Florida, such change was authorized by the corporate agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE _____ (NOTE: Registered Agent signature required)					
12. OFFICERS AND DIRECTORS 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 1.5 TITLE 1.6 NAME 1.7 STREET ADDRESS 1.8 CITY - ST - ZIP 1.9 TITLE 1.10 NAME 1.11 STREET ADDRESS 1.12 CITY - ST - ZIP 1.13 TITLE 1.14 NAME 1.15 STREET ADDRESS 1.16 CITY - ST - ZIP 1.17 TITLE 1.18 NAME 1.19 STREET ADDRESS 1.20 CITY - ST - ZIP					
13. 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 2.5 TITLE 2.6 NAME 2.7 STREET ADDRESS 2.8 CITY - ST - ZIP 2.9 TITLE 2.10 NAME 2.11 STREET ADDRESS 2.12 CITY - ST - ZIP 2.13 TITLE 2.14 NAME 2.15 STREET ADDRESS 2.16 CITY - ST - ZIP 2.17 TITLE 2.18 NAME 2.19 STREET ADDRESS 2.20 CITY - ST - ZIP					

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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/10/1989		
4. FEI Number 65-0222111	Applied For	Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No		

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
CABRERA, RAUL D 1602 ALTON RD. STE. 360 MIAMI BEACH FL 33139	81	Name	Rachel Azpiri
	82	Street Address (P.O. Box Number is Not Acceptable)	1602 ALTON RD STE. 360
	83		MIAMI BEACH, FL.
	84	City	FL 85 Zip Code 33139

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] (Date of placement of this order on file) 6/7/98
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE D AZPIRI, LORENZO 1602 ALTON RD. STE. 380 MIAMI BEACH FL 33139	☐ CHANGE ☐ ADDITION 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE D AZPIRI, RACHEL 1602 ALTON RD. STE. 360 MIAMI BEACH FL 33139	☐ CHANGE ☐ ADDITION 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	☐ CHANGE ☐ ADDITION 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	☐ CHANGE ☐ ADDITION 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	☐ CHANGE ☐ ADDITION 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	☐ CHANGE ☐ ADDITION 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	500000250005 -06/19/98 - 01/14 - 040 ***150.00

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 trustee 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 amendment with an address

SIGNATURE:  *11/98 (305) 579-2183

CR2E034 (10/97)