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

14. I hereby certify that the information supplied with this filling does not civalify indicated on this annual report or supplemental annual report is take and at officer or director of the corporation or the recover or trustee employed by Block 12 or Block 13 if changed, or on an attrichment with an address.

SIGNATURE

PROFIT May 04 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #

1. Corporation Name (3) K65988 GOLDKAP REALTY, INC. Principal Place of Business Mailing Address 384 S MILITARY TRL 384 S MILITARY TRL DEERFIELD BEACH FL 33442 DEERFIELD BEACH FL 33442 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1989 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0108388 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees Country Zφ Country Zip 8. This corporation owes or has paid the current year Intangible 24 Personal Property Tax due June 30. 29 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name **GOLDSTEIN, ARNOLD S.** 384 S. MILITARY TRAIL Street Address (P.O. Box Number is Not Acceptable) **DEERFIELD BEACH FL 33442** 83 84 City 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, typod or printed name of registered agent and title if applicable (NO!E. Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETE Change Addition TOTLE 11 TITLE GOLDSTEIN, ARNOLD S. NAME 1.2 NAME 384 S MILITARY TR:L STREET ADDRESS 1.3 STREET ADDRESS DEERFIELD BEACH FL 33442 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Addition TITLE 2.1 TITLE GOLDSTEIN, MARLENE J. NAME 2.2 NAME 125 AVENUE L STREET ADDRESS 2.3 STREET ADDRESS **DELRAY BEACH FL 33483** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change __ Addition TITLE 31 TITLE NAME KAPLAN, MARY 3.2 NAME 518 N.W. 77TH ST. 3.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE KAPLAN, PHILLIP 4. 2 NAME NAME 518 N.W. 77TH ST. STREET ADDRESS 4.3 STREET ADDRESS **DELRAY BEACH FL 33487** CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TOLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE Change Addition 61 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

FILED

the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information are and that pry eignature shall have the same legal effect as if made under oath; that I am an execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

CR2EGS4