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**Apr 17 1997 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 1. Corporation Name L21507 (3)
C & L REALTY, INC.

Principal Place of Business: 7373 Fairway Drive #115, Miami Lakes, FL 33014
Mailing Address: P.O. Box 4338, Miami, FL 33014-0338

3. Date Incorporated or Qualified: 10/06/1989
3a. Date of Last Report: 03/18/96
4. FEI Number: 65-0149119
5. Certificate of Status Desired:
6. Election Campaign Financing Trust Fund Contribution:
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes: Yes No

2. Principal Place of Business: 21 7373 Fairway Drive, #115, Miami Lakes, FL 33014
2a. Mailing Address: 26 P.O. Box 4338, Miami, FL 33014-0338
22. City & State: Miami Lakes, FL 33014
27. City & State: Miami, FL 33014-0338
24. Zip: 33014
25. Country: FL
29. Zip: 33014
30. Country: FL

9. Name and Address of Current Registered Agent
LEIBNITZER, CHARLES, N.
7373 Fairway Drive, #115
Miami Lakes, FL 33014

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code: FL

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: CHARLES LEIBNITZER
Date: 4/07/97

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	LEIBNITZER, CHARLES, N.	
STREET ADDRESS	P.O. BOX 4338	
CITY - ST - ZIP	MIAMI, FL 33014-0338	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	PD LEIBNITZER, CHARLES, N.	
13 STREET ADDRESS	7373 Fairway Drive, #115	
14 CITY - ST - ZIP	MIAMI LAKES, FL 33014	
21 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME		
23 STREET ADDRESS		
24 CITY - ST - ZIP		
31 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME		
33 STREET ADDRESS		
34 CITY - ST - ZIP		
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

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4/17/97
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705-556-6066

14. I do 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 contained 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. 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 attachment with an address.

SIGNATURE: Charles Leibnitzer
Date: 4/17/97
Phone: 705-556-6066

CR2E034 (9/96)