FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 24 PM 2:15

DOCUMENT # L26539 (1)

1. Corporation Name
BREAKSTONE PROPERTIES, INC.

Principal Place of Business	Mailing Address
% ARTHUR BREAKSTONE ~~8900 S.W. 67TH COURT~~ ~~MIAMI FL 33156~~	% ARTHUR BREAKSTONE ~~8900 S.W. 67TH COURT~~ ~~MIAMI FL 33156~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 10/30/1989
3a. Date of Last Report: 01/19/1994

2. Principal Place of Business	2a. Mailing Address
21 19500 Collins Avenue	26 19500 Collins Avenue
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Miami Beach, Fla.	City & State 28 Miami Beach, Fla.
Zip 24 33160 Country 25 U.S.A.	Zip 29 33160 Country 30 U.S.A.

4. FEI Number: 65-0203780 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $9.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BREAKSTONE, ARTHUR ~~8900 SW 67 CT~~ ********** ~~MIAMI FL 33156~~	81 Name: Same 82 Street Address (P.O. Box Number is Not Acceptable): 19500 Collins Avenue 83 84 City: Miami Beach, FL 85 Zip Code: 33160

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☒ Change ☐ Addition
NAME	NOAH, BREAKSTONE	1.2 NAME	
STREET ADDRESS	8700 S.W. 67TH COURT	1.3 STREET ADDRESS	19500 Collins Avenue
CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami Beach, Fla. 33160
TITLE		2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 attachment with an address.

SIGNATURE: _____ Jan. 20, 1995 305-935-0007
FOR AMENDED AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Noah Breakstone

0166804 CR