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

APPROVED AND FILED

95 MAY -1 AM 4:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L61448 (1)

1. Corporation Name

CORPORATE PROPERTY MANAGEMENT, INC.

Principal Place of Business	Mailing Address
8181 W. BROWARD BLVD. PLANTATION FL 33326 US	8181 WEST BROWARD BLVD. PLANTATION FL 33326 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/02/1990
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0177336 — 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 has liability for intangible tax under S. 199.032, Florida Statutes ☑ Yes ☐ No

2. Principal Place of Business — 21, 22 Suite, Apt # etc., 23 City & State, 24 Zip, 25 Country
2a. Mailing Address — 26, 27 Suite, Apt # etc., 28 City & State, 29 Zip, 30 Country

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
KRUZEL, DAVID 8181 W BROWARD BLVD S350 PLANTATION FL 33324	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City — FL — 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 ______ DATE ______

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1 TITLE	☒ Change ☐ Addition
NAME	WACKS, EDWARD	1 NAME	No Longer An Officer
STREET ADDRESS	7481 NW 4TH STREET	1 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	1 CITY-ST-ZIP	
TITLE	V	2 TITLE	President ☑ Change ☐ Addition
NAME	WACKS, DIANE	2 NAME	
STREET ADDRESS	8181 WEST BROWARD BLVD.	2 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	2 CITY-ST-ZIP	
TITLE	VSTD	3 TITLE	☐ Change ☐ Addition
NAME	KRUZEL, DAVID	3 NAME	
STREET ADDRESS	8181 WEST BROWARD BLVD	3 STREET ADDRESS	
CITY-ST-ZIP	PLANTATION FL	3 CITY-ST-ZIP	
TITLE		4 TITLE	☐ Change ☐ Addition
NAME		4 NAME	
STREET ADDRESS		4 STREET ADDRESS	
CITY-ST-ZIP		4 CITY-ST-ZIP	
TITLE		5 TITLE	☐ Change ☐ Addition
NAME		5 NAME	
STREET ADDRESS		5 STREET ADDRESS	
CITY-ST-ZIP		5 CITY-ST-ZIP	
TITLE		6 TITLE	☐ Change ☐ Addition
NAME		6 NAME	
STREET ADDRESS		6 STREET ADDRESS	
CITY-ST-ZIP		6 CITY-ST-ZIP	

14. I 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)(n), 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: Diane Wacks — Diane Wacks, President — 05-01-95 — 305-424-4100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — DATE — DAYTIME PHONE #

0032136 CP