

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L84601

FILED  
Apr 26, 2012  
Secretary of State

**Entity Name:** J.I. KISLAK REALTY INVESTMENTS, INC.

**Current Principal Place of Business:**

7900 MIAMI LAKES DRIVE WEST  
MIAMI LAKES, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

7900 MIAMI LAKES DRIVE WEST  
MIAMI LAKES, FL 33016 US

**New Mailing Address:**

**FEI Number:** 65-0205268

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHRISTY, COMPLO  
7900 MIAMI LAKES DRIVE WEST  
MIAMI LAKES, FL 33016 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: CD  
Name: KISLAK, JAY I.  
Address: 7900 MIAMI LAKES DR WEST  
City-St-Zip: MIAMI LAKES, FL 33016

Title: DPT  
Name: BARTELMO, THOMAS  
Address: 7900 MIAMI LAKES DRIVE WEST  
City-St-Zip: MIAMI LAKES, FL 33106

Title: VP  
Name: LUBOW, CHERYL  
Address: 7900 MIAMI LAKES DRIVE WEST  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VPS  
Name: COMPLO, CHRISTY  
Address: 7900 MIAMI LAKES DRIVE WEST  
City-St-Zip: MIAMI LAKES, FL 33016

Title: VP  
Name: BRAUN, STEPHEN  
Address: 7900 MIAMI LAKES DRIVES WEST  
City-St-Zip: MIAMI LAKES, FL 33016

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTY COMPLO

VPS

04/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date