FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 **DIVISION OF CORPORATIONS** (4)DOCUMENT # 1. Corporation Name BPG REALTY, INC. Principal Place of Business Mailing Address 5900 N ANDREWS AVE 5900 N. ANDREWS AVE STE. 627 STE. 627 FT LAUDERDALE FL 33309 FT LAUDERDALE FL 33309 3. Date Incorporated or Qualified 3a. Date of Last Report 07/23/1990 03/07/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 76-0332865 21 26 Not Applicable Suite, Apt. #, etc. Suite Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Ζip Country Zφ 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DOWNEY, STUART D 82 Street Address (P.O. Box Number is Not Acceptable) 5900 N ANDREWS AVE #627 83 FT. LAUDERDALE FL 33309 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating): DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 CEO THLE DELETE 1. 1 TITLE ☐ Change ☐ Addition PATRINELY, C. D NAME 1.2 NAME CR2E034 200 WESTLAKE PRK, #100 STREET ADDRESS 1.3 STREET ADDRESS **HOUSTON TX** CHIY-ST-ZIP 14 CITY-ST-ZIP TIFLE DELETE 2 1 TITLE Change Addition NICHOLLS, MICHAEL E NAME 22 NAME 200 WESTLAKE PRK. #100 STREET ADORESS 2 3 STREET ADDRESS **HOUSTON TX** CITY - ST - ZIP 2.4 CITY-ST-ZIP TITLE DELETE 3.1 TITLE ☐ Change ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3. STREET ADDRESS CITY-ST-ZIP 3.4 CITY - ST - ZIP THILF DELETE 4.1 TITLE ☐ Change Addition NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP TITLE DELETE Change 5 1 TITLE ☐ Addition 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE □ DELETE 6 1 TITLE Change Addition NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 64 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 coath; that I am an officer or director of the corporation or the receiver or trustee annual report as required by Chapter 607, Florida Statutes; and that my name annuals in Block 12 or Block 13 if chapter 4 and the statutes and the same legal effect as if made under the same legal effect as if we have the same legal effect as if made under the same legal effect as if we have the same lega

appears in Block 12 or Block 13 if changed,

SIGNATURE: SIGNATURE AND TYPED ON

713.560-4600

12/95)