

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 10 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

DOCUMENT # **M07935**

(3)

1. Corporation Name:

**ROBERT M. LEVY REAL ESTATE CO.**

Principal Place of Business

**9703 S. DIXIE HWY.  
SUITE 5  
MIAMI FL 33156**

Mailing Address

**9703 S. DIXIE HWY.  
SUITE 5  
MIAMI FL 33156**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

**11/19/1984**

4. FEI Number

**59-2499592**

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 owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

**ALMAN, MICHAEL J.  
2450 HOLLYWOOD BLVD., #401  
HOLLYWOOD FL 33020**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

**FL**

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0507 and 607.1506, 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

Signature, typed or printed name of registered agent and the corporation

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE  
NAME

**PST  
LEVY, ROBERT M.  
9703 S. DIXIE HWY. #5  
MIAMI FL**

☐ DELETE

STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME

**D  
LEVY, ROBERT M.  
9703 S. DIXIE HWY. #5  
MIAMI FL**

☐ DELETE

STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME

STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME

STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME

STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME

STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE  
12 NAME

13 STREET ADDRESS  
14 CITY-ST-ZIP

21 TITLE  
22 NAME

23 STREET ADDRESS  
24 CITY-ST-ZIP

31 TITLE  
32 NAME

33 STREET ADDRESS  
34 CITY-ST-ZIP

41 TITLE  
42 NAME

43 STREET ADDRESS  
44 CITY-ST-ZIP

51 TITLE  
52 NAME

53 STREET ADDRESS  
54 CITY-ST-ZIP

61 TITLE  
62 NAME

63 STREET ADDRESS  
64 CITY-ST-ZIP

☐ Change ☐ Addition

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14. I 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 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:

*Robert M. Levy*

2/3/98

(305) 667-8687

CR2E034 (10/97)