CORF ANNU	PORTION AL REPORT			3. Mortha ry of State	m e				
DOCUMENT # M16297 (7) 1. Corporation Name									
•	MBIA REALTY CORP.		•						
000011	MONTHERE TO COM.								
Principal Place	of Business	Mai	ling Address						01811 01031 (601
	DIXIE HWY . STE D II BEACH FL 33160		8400 West Dixie HW Korth Miami Beach		)				
US	W BENOTITE SSIGN		is			3. Date Incorporated or Qualified 06/05/1985	3a. Date of <b>04</b> /2	Last Re 24/19	·
2. Principa' Pla	ce of Business		Mailing Address			4. FEI Number			Applied For
Suite, Apt. #	I, etc.	26	Suite, Apt. #, etc.			59-2680757  5. Certificate of Status Desired			Not Applicable Additional
22		27	0) 00						Required
City & State		28	City & State			Election Campaign Financing     Trust Fund Contribution			May Be d to Fees
Zip	Country	<u> </u>	Zip	_	intry	This corporation has liability for Florida Statutes	intangible tax u ₩ No	under s	199.032,
24	9. Name and Address of Curre	29 nt Regist	ered Agent	30		10. Name and Address of New F		ent	
					81 Name				
LANE, P					82 Street Ad 1 8 4 0	dress (P.O. Box Number is Not Acceptate  O West Dixie High	vav. Si	ıite	D
53 TO TWY STE: -10	<del>V-33 AVE.</del> 0				83	o nest birie nigh	ay, D.		
	DERDALE-FL-33389				84 City		FL	85 Z	p Code
11. Pursuani 1	o the provisions of Sections 607.050	2 and 607	.1508, Florida Statute	s, the abo	ove-named corp	poration submits this statement for the pu	mose of chanc	ging its r	egistered office
or register	ed agent, or both, in the State of Flo h, and accept the obligations of, Sec	rida. Such	change was authorize	ed by the	corporation's bo	pard of directors. I hereby accept the app	ointment as re	gistered	Lagent. Lam
SIGNATURE _	Signature, typed or printed name of registered age	of pod tito il a	ordicable (NO:	11: Buoistere	d Agent signature requ	ired when reinstating	DATE		
12.	OFFICERS A			13.		ADDITIONS/CHANGES TO OFF			
TITLE	D		DELETE				ICERS AND D	IRECTO	DRS IN 12
11111			_	11	TITLE			IRECTO Change	DRS IN 12
NAME	SHIDLOWSKY, HOWARD			1.2 N	IAME				DRS IN 12
NAME STREET ADDRESS	18400 W. DIXIE HWY., STE	. D		1.2 N 1.3 S	IAME STREET ADDRESS				Addition
NAME STREET ADDRESS CITY-ST-ZIP		. D		1.2 N 1.3 S 1.4 C	IAME				PRS IN 12 Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	18400 W. DIXIE HWY., STE	. D	☐ DELETE	1.2 N 1.3 S 1.4 C 2 1	STREET ADDRESS			Change	
NAME STREET ADDRESS CITY-ST-ZIP	18400 W. DIXIE HWY., STE	. D		1.2 N 1.3 S 1.4 C 2 1	STREET ADDRESS CITY - ST - ZIP			Change	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	18400 W. DIXIE HWY., STE	. D	□ DELETE	12 N 1.3 S 1.4 C 2.1 1 2.2 N 2.3 S 2.4 C	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP			Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	18400 W. DIXIE HWY., STE	. D		12 N 1.3 S 1.4 C 2 1 T 2.2 N 2.3 S 2.4 C 3.1	IAME STREET ADDRESS OITY-ST-ZIP TITLE VAME STREET ADDRESS OITY-ST-ZIP TITLE			Change	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	18400 W. DIXIE HWY., STE	. D	□ DELETE	12 N 1.3 S 1.4 C 2 1 C 2.2 N 2.3 S 2.4 C 3.1 3.2 N	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME			Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	18400 W. DIXIE HWY., STE	. <b>D</b>	□ DELETE	12 M 13 S 1.4 C 2 1 2 2 A 2 3 S 2 4 C 3 1 3 2 B	IAME STREET ADDRESS SITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS STREET ADDRESS			Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COMMENTED TO THE TADDRESS CITY-ST-ZIP	18400 W. DIXIE HWY., STE	. D	☐ DELETE	12 N 1.3 S 1.4 C 2 1' 22 N 29 S 24 C 3 1 3 2 N 3 3 3.4 C	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP			Change Change Change	Addition
NAME STREET ADDRESS CITY-S1-ZIP TITLE	18400 W. DIXIE HWY., STE	. D	□ DELETE	12 N 1.3 S 1.4 C 2 1 1 2.2 N 2.3 S 2.4 C 3.1 3.2 N 3.3 3.4 ( 4.1	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE			Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TUTE NAME STREET ADDRESS CITY-ST-ZIP TUTE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	18400 W. DIXIE HWY., STE		☐ DELETE	12 N 1.3 S 1.4 C 2 1 ' 22 N 23 S 24 C 3 1 3.2 N 3.3 3.4 ( 4.1 1 4.2 I	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			Change Change Change	Addition
NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	18400 W. DIXIE HWY., STE		☐ DELETE	12 M 1.3 S 1.4 C 2 1 ' 2 2 M 2 3 S 2 4 C 3 1 3 2 M 3 3 3 3 4 C 4 1 4 2 C 4 3 S	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS			Change Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TUTE NAME STREET ADDRESS CITY-ST-ZIP TUTE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME NAME	18400 W. DIXIE HWY., STE	. D	☐ DELETE	12 N 1.3 S 1.4 C 2 1' 22 N 23 S 24 C 3 1 3.2 N 3.3 3.4 ( 4.1 4.2 ) 4.3 S 4.4 S	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			Change Change Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP TUTE 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	18400 W. DIXIE HWY., STE	. D	☐ DELETE	12 M 1.3 S 1.4 C 2 1 T 22 M 23 S 24 C 3 1 3 2 M 3 3 3.4 C 4.1 4.2 C 4.3 S 4.4 C 5 1	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE THE	18400 W. DIXIE HWY., STE	. D	☐ DELETE	12 M 1.3 S 1.4 C 2 1 2 2 M 2 3 S 2 4 C 3 1 3 2 M 3 3 3 4 4 4 1 4 4 1 5 1 5 2 C	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME	18400 W. DIXIE HWY., STE	. D	DELETE  DELETE	12 M 1.3 S 1.4 C 2 1 2 2 A 2 3 S 2 4 C 3 1 3 2 A 3 3 3 4 C 4 4 1 4 3 S 4 4 C 5 1 5 5 3 S	NAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM			Change Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-SI-ZIP TULE NAME STREET ADDRESS CITY-SI-ZIP TILE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS	18400 W. DIXIE HWY., STE	. D	☐ DELETE	12 M 1.3 S 1.4 C 2 1 2 2 A 2 3 S 2 4 C 3 1 3 2 A 3 3 3 4 C 4 4 1 4 3 S 4 4 C 5 1 5 5 3 S 5 4 C	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS			Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	18400 W. DIXIE HWY., STE	. D	DELETE  DELETE	12 M 1.3 S 1.4 C 2 1 2 2 A 2 3 S 2 4 C 3 1 3 2 A 3 3 3 4 C 4 4 1 5 1 5 2 C 5 3 S 5 4 C 6 1	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP			Change Change Change Change	Addition Addition Addition
NAME STREET ADDRESS CITY-ST-ZIP TITLE	18400 W. DIXIE HWY., STE	. D	DELETE  DELETE	12 M 1.3 S 1.4 C 2 1 2 2 A 2 3 S 2 4 C 3 1 3 2 A 3 3 3 4 C 4 4 1 5 1 5 2 C 5 3 S 5 4 C 6 1 6 2	IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME TITLE VAME VAME VAME VAME VAME VAME VAME VAM			Change Change Change Change	Addition Addition Addition

14. I do hereby certify that the information supplied with this filing is voluntary furnished and does not qualify for the excertify that the information indicated on this annual report or supply mental annual report is true and accurate and the oath; that I am an officer or director of the corporation of the receiver of trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or the corporation of the receiver of trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or the corporation of the receiver of trustee empowered to execute this report appears in Block 12 or Block 13 if changed, or the corporation of the receiver of the corporation of the c

04/16/96 Date

by furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further all annual report is true and accurate and that my signature shall have the same legal effect as if made under trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name an address.

(305) 932-8600

Daytime Phone N