FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

1. Corporation Name

DOCUMENT # M31690

(4)

PROPERTIES	SERVICE	& MANAGEMENT.	INC.
I IIVI LIIILU	ULTITIOL	u mriinaliii.	1110

THOI EITHEO DETITIOE & WARRAGEMENT, 190.									
Principal Place	of Business	Mailing Address	****			t neginerii (Ele ililet digin etilet ilili	! 		(4 E1E11 01011 1001
	6TH TERRACE ACH FL 33180	2651 N.E 186TH TERI N.MIAMI BEACH FL 3							
			Agent Aut / No. / No. 10. 10. 10. 10. 10. 10. 10. 10. 10. 10	·		 Date Incorporated or Qualified 05/07/1986 	3a. Date	of Last R 5/01/19	
2. Principal Pla 21	ace of Business	2a. Mailing Address				4. FEI Number		J	Applied For
Suite, Apt. 4	#. elc.	Suite, Apt. #, etc.				59-2676342			Not Applicable
22 City & State		27 City & State		·····	·	5. Certificate of Status Desired		Fee	Additional Required
23	Mil dalam da malan saphipupupupu gar 1828 1828 1828 1838 1844 Adalah da akim na masang maya ya 1941 1987 17. ya	28				Election Campaign Financing Trust Fund Contribution		Adde	O May Be d to Fees
Ζφ 24	Country 25	Zip	Cour	itry		8. This corporation has liability for i		under s	199.032,
24	9. Name and Address of Curre	29 nt Registered Agent	30			Florida Statutes Yes 10. Name and Address of New R		anni	
				81 Name	e	10, 11 and Addies of Real I	cylatel 60 F	Apilt	· · · · · · · · · · · · · · · · · · ·
POTSHI	TYN, ARYE C.					60 6			
	E 186TH TERRACE			82 Street Ad		s (P.O. Box Number is Not Acceptab	(Đ)		
	AI BEACH FL 33180		ħ	83					
			-	84 City			FL	85 Zip	p Code
11. Pursuant to	o the provisions of Sections 607.0502	and 607.1508, Florida Statut	es, the abov	e-named	corporation	on submits this statement for the pur	onee of char	.L. I nging its r	egistered offic
or registere familiar with	ed agent, or both, in the State of Flori h, and accept the obligation of Sec	da. Such change was autho riz tion 607.0505, Florida Statu tes	sed by the co s.	orporation'	's board o	of directors. I hereby accept the appo	intment as r	egistered	l agent. I am
SIGNATURE	Signature, typical or printed name of registered agon	ARMEC 2	OTSH OTE: Registered A	TYN	0		4/2º	196	
12.	· 	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTO	RS IN 12
TITLE	P	DELETE	1. 3 1016					Change :	Addition
NAME PADEET ADDRESS	ROTSHTYN, ARYE C.		1.2 NAN						
STREET ADDRESS CITY-S1-ZIP	19411 NE 22 AVENUE			EET ADDRESS	3				
TITLE	NORTH MIAMI BEACH FL V	☐ DELETE	1.4 GHY 2. 1 J(T)	r-ST-ZIP			·	Change	Addition
NAME	ROTSHTYN, JANET D.		2.2 NAM				L	V:tariye	☐ Noomon
STREET ADDRESS	19411 NE 22 AVENUE			CET ADDRESS	3				
CITY-ST-ZIP	NORTH MIAMI BEACH FL			- ST - ZIP					
TITLE		☐ DELE1£	3. 1 HT	F		William I was a second of the		Change	Addition
NAME			3.2 NAV	15		•			
STREET ADDRESS			3.3 STR	eet address	3	•	4		
CITY-ST-ZIP		F1 bbs bar		- \$1 - Z(P	<u> </u>				
TITLE NAME		DELETE	4. 1 1(1)				L_	Change	Addition
STREET ADDRESS			4.2 NAM						
CITY-ST-ZIP				ET ADDRESS - ST - Z:P					
TITLE		DELETE	5. 1 1/TL					Change	Addition
NAME			5.2 NAM					•	
STREET ADDRESS			5 3 STR	ET ADORESS					
CITY-ST-I-P			5.4 CH Y	- ST-ZIP					
TITLE		DECETE	6 1 TITL					Change	Addition
NAME .			62 NAM	•					
STREET ADDRESS				ET ADDRESS					
14. I do hereby	certify that the information supplied v	with this filing is voluntarily furni	640/TY shed and do	es not au	L. lalify for th	na exemption stated in Section 119.0	7(3)/k) Florid	ia Statut	se I further
oath; that I	the information in liceted on this annual am an officer or director of the corpo- Block 12 or Block 13 if changed, or c	iai report or supplemental a nnu ration or the receiver or trust ee	Jai report is 1 a empowered	ำแก ลกก ล	courate a	ndi inat my sianatura shall haya tha c	ama lagal ot	fact on if i	mada undar
SIGNATI	JRE: SIGNATURE AND TYPED OR	A JANET	ROT:	ケルマ	m	4 29/96	305-	933 irie Prione *	-2010