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

PROFIT CORPORATION ANNUAL REPORT

1998

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M58008

(7)

GARY LYNN REALTY, INC.

| Feb 13 1998 8:00an | n | | | | | |
|--------------------|---|--|--|--|--|--|
| Secretary of State | | | | | | |

EII ED

| Principal Place of Business | Mailing Address | | | | | |
|---|---|------------|---|--|--|--|
| 420 LINCOLN RD STE 242 MIAMI BCH FL 33139 US | 420 LINCOLN RO SUITE 242 MIAMI BEACH FL 33139 US | | DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/25/1987 | | | |
| 2. Principal Place of Business | 2a. Mailing Address | | 4. FEI Number | Applied For | | |
| 275 ARTHUR GALLEY RD | 26 4703 N. BAY | RD | 59-2842557 | Not Applicable | | |
| Suite, Apt. #, etc. 22 Suite # 409 | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| City & State 23 MiAmi BEAUT FL | City & State . 28 MiAMI BOALF | 1 1= | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | | |
| Zip Country 25 USA | 29 33140 30 | USA | <u> </u> | Yes No | | |
| 9. Name and Address of Current Registered Agent | | | | 10. Name and Address of New Registered Agent | | |
| JAY, SCOTT R. | | 81 Name | Ð | | | |
| 420 LINCOLN ROAD S-327 | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | |
| MIAMI BEACH FL 33139 | | 83 | | | | |
| | | 84 City | FL | 85 Zip Code | | |
| 11. Pursuant to the provisions of Sections 607.0502 | and 607,1508, Florida Statutes, the a | above-name | d corporation submits this statement for the purpose of | changing its registered | | |

onice 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 title if applicable (NOTE: Registered Agent signature required when reinstating) 22E034 (10/97 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. PD TITLE DFLETE 1.1 TITLE Change Addition LYNN, GARY
975 ARTHUR GODERNY RD 5MIAMI BENCH, FC 33140 NAME LYNN, GARY 1.2 NAME 420 LINCOLN ROAD, S-242 STREET ADDRESS 1.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 14 C(1Y-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE NAME 2.2 NAME STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE TITLE 3 1 THEF Change Addition 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELFTE ☐ Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - S1 - 7IP DELETE TITLE 5 1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE TITLE 6 1 TITLE Addition NAME 6.2 NAME 000002431530 STREET ADDRESS 6.3 STREET ADDRESS -02/16/98--01080--024 14. Thereby 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 of the receiver of 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 for m an attachment with an address

110/96

205-571-8000