SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # N21678

CREATER MIAMI REAL ESTATE ASSOCIATION INC

FILED Jul 16 1998 8:00am Secretary of State

GREATER MINIMI REAL ESTATE ASSOCIATION, INC.				
Principal Place of Business Malling Address 1680 MICHIGAN AVE. 1680 MICHIGAN AVENUE SUITE 100 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139			3. Date Incorporated or Qualified Office (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
US	U\$		4. FEI Number 59-0358530	Applied For Not Applicable
2. Principal Place of Business 21 2050 Cora / WLY	2a. Malling Address 26 2050 Cora/	wy	5. Certificate of Status Desired	\$8.75 Additional Fee Required
Sulte, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State	City & State 28 MIGMI / f/		7. Is this nonprofit corporation a homeowners association? Yes No	
24 37/45 25 Country USB	29 33/45 COL	intry USA	This corporation owes or has paid the curr Personal Property Tax due June 30.	ent year Intangible Yes No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent		
		81 Name Brian Giller		
GILLER, BRIAN ESQ 1880 MICHIGÁN AVE., SUITE 100		82 Street Address (P.O. Box Number is Not Acceptable)		
SUITE 600		83		
MI AMI DEACH FL 3 3139		84 City M1	am i FL	85 Zip.Code
11. Pursuant to the provisions of sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE 1.1 TITLE DELETE Change Addition GRABILL, JERRY 1.2 NAME NAME ONE HARBOUR WAY, #306 1.3 STREET ADDRESS STREET ADDRESS **BAL HARBOUR FL 33154** CITY-ST-ZIP 1.4 CITY-ST-ZIP 2.1 TITLE TITLE DVP DELETE Change Addition JUDY LONDON 2.2 NAME NAME 1125 WASHINGTON AVENUE 2.3 STREET ADDRESS STREET ADDRESS <u>Miami Beach Fl</u> CITY-ST-ZIP 2.4 CITY-ST-ZIP 3.1 TITLE TITLE DELETE Change Addition CURLESS, DIANE 3.2 NAME NAME **5950 LA GORCE DRIVE** 3.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33140 CITY-ST-ZIP 3.4 CITY-ST-ZiP 4.1 TITLE TITLE DELETE Change Addition NAME SIDNEY KOSLOVSKY 4.2 NAME 16100 COLLINS AVE., #113 STREET ADDRESS 4.3 STREET ADDRESS n. **M**iami Beach Fl 4.4 CITY-ST-ZIP CITY-ST-ZIP 5.1 TITLE 900002591369 TITLE DELETE Addition NAME SHEFFMAN, TAMARA 5.2 NAME -07/17/98--01008--024 4800 ROYAL PALM AVE 5.3 STREET ADDRESS ***61.25 CITY-ST-ZIP MIAMI BEACH FL 33140 6.4 CITY-ST-ZIP TITLE 6.1 TITLE Change OELETE LEVINE, MAUREEN 6.2 NAME NAME 6.3 STREET ADDRESS 2050 COTAI WAY 420 LINCOLN RD #800 MANI BEACH FL STREET ADDRESS

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

Zeven TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR