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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000013797 (4)

AMERICAN REAL ESTATE INVESTMENT CORP. OF BROWARD

Principal Place of Business

Mailing Address

FILED May 05 1997 8:00am Secretary of State

APRIL 28. 1997

421-6191

| POMPANO BEACH FL 33084 | | POMPANO BEACH FL 33064-2534 | | | | | | | | | | | |
|--|--|---|---|------------------------|--|--|--------------------------------------|---|-----------------------------------|---|-------------------------------|---------------------------|-------------|
| ; • • | | | | | | _ | ate Incor 2/24/19 | porated or Qu | alified | | te of Last)6/1996 | | ort |
| 2, Principal P | lace of Business | 28. Mailing Address | | | · | | El Numbo | | | .L | | Applie | ed For |
| 21 | | 26 | | | | | 65-039 | 1477 | | | | Not A | pplicable |
| Suite, Apt. | #, etc. | Suite, Apt. #. etc. | | | | 5. Ca | ertificate | of Status Des | ired | | \$8.75 Fee | 5 Add Requi | |
| City & State | 6 | City & State | | | | 6. El | ection Ca | ampaign Finar | ncing | | \$5.0 | 0 ма | ay Be |
| 23 | | 28 | | | | Tr | ust Fund | Contribution | | | | d to F | |
| . Zip | Country | Zip | L Co | untry | | | | ration has liab | ility for in | tangible | tax under | rs. 19 | 9.032, |
| 24 | 25 | [29] | 30 | | <u>.</u> | | orida Sta | | | | _l No | | |
| | 9. Name and Address of Currer | it Registered Agent | | 81 | Marria | | | Address of | | · · · · · · · · · · · · · · · · · · · | - | | |
| | IC, ANDRE | | | 61 | Name | PRIN | ICE, | ANDRE | (C i | orrec | it s | pel | ling |
| | 3 N.W. 3RD TERRACE | | | 82 | Street Add | ress (P.O | . Box Nu | mber is Not A | cceptabl | ie) | | | |
| POM | IPANO BEACH FL 33064 | | | 02 | | | | | | | | | |
| - | | | | 83 | | | | | | | | | |
| | | | | 84 | City | | | | | FL | 85 Zi | ip Coo | de |
| 11. Pursuant | to the provisions of Sections 607.050 | 2 and 607 1508, Florida State | utes, the a | above | -named corp | poration s | submits th | nis statement | or the pu | urpose of | changing | j its re | gistered |
| agent. I a | egistered agent, or both, in the State m familiar with, and accept the oblig | ations of, Section 607.0505, F | lorida Sta | atutes | the corpora | nion's boa | ira oi aire | ectors. I nerec | у ассер | tine appo | ointment a | as reg | jistered |
| SIGNATURE | Signature, typed or printed name of registered ago | ent and title if repolable (NC | Olf Boo sten | ed Ager | nt signature requi | ited when rein | netation) | | | DATE | | | |
| 12. | OFFICERS AN | | 13. | | | | | CHANGES TO | OFFIC | | DIRECT | ORS II | N 12 |
| TITLE | PSD | DELETE | 1.1 T | IITLE | | | | | | | ☐ Change | | Addition |
| NAME | PRINCE, ANDRE | | 1.2 N | NAME | | | | | | | | | |
| STREET ADDRESS | 4413 N.W. 3RD TERRACE | | 1.3 \$ | STREET. | ADDRESS | | | | | | | | |
| CITY-ST-ZIP | POMPANO BEACH FL 33064 | | 140 | CITY - \$1 | T-ZIP | | | | | | | | |
| TITLE | | DELETE | | IIILE | | | • | | | | Change | e | Addition |
| NAME | | | 2.21 | 1МАР | | | | | | | | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | ADDRESS | | | | | | | | |
| CITY-ST-ZIP | | | 2. 4 CI | | T - ZIP | | | | | | | | |
| TITLE | | DELETE | 3.1 TITLE | | | | | | | | Change | e | Addition |
| NAME | | | 3.21 | MAM | | | | | | | | | |
| STREET ADDRESS | | | 3.3 9 | STREET. | ADDRESS | | | | | | | | |
| CITY-ST-ZIP | | | 3.4. | CITY-S | T - ZIP | | | | | | | | |
| TITLE | | ☐ DELETE | 4.1 T | IITLF | | | | | | | Change | e [| Addition |
| NAME | | | 4.2 | NAME | | | | | | | | | |
| STREET ADDRESS | | | 4.3 5 | STREET. | ADORESS | | | | | | | | |
| CITY-ST-ZIP | | | 4.4 (| CITY-SI | T-ZIP | | | | | | | | |
| TITLE | | ☐ DELETE | 5.11 | TITLE | | | | | , | | Chang | c L | Addition |
| NAME | | | 5.21 | MAME | | | | | | | | | |
| STREET ADDRESS | | | 5.3 9 | STREET. | ADDRESS | | | | | | | | |
| CITY-ST-ZIP | | | 5.4 (| CITY-SI | [-ZIP | | | | | | | | _ |
| TITLE | | ☐ DELETE | 6.11 | TITLE | | | | | | | Change | e [| Addition |
| NAME | | | 6.21 | MAME | | | | | | | | | |
| STREET ADDRESS | | | 6.3 3 | STREET. | ADDRESS | | | | | | | | |
| CITY-ST-ZIP | <u> </u> | | | CITY-ST | | | | | | | | | |
| 14. I do herel informatio I am an o appears i | by certify that the information supplie on indicated on this annula report or s fficer or director of the domoration or in Block 12 of flock 13 if changed, o | d with this filling does not qua supplemental annual report is i the receiver or trustee empo r, on an attachment with an ac | alify for the true and owered to ddress. | execi accu execi | mption stated trate and that ute this repo | d in Section of my signated as ort as requ | on 119.0° ature sha iired by 0 | 7(3)(i), Florida ill have the sa Chapter 607, F | Statutes me legal Torida St | : I further effect as latutes; ar | certify the if made to that m | nat the under y nam | oath; that |