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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000033040 (5)

LUCKY COMMERCIAL REALTY, INC.

FILED Apr 16 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address 5761 NORTHWEST 37TH AVENUE 5761 NORTHWEST 37TH AVENUE MIAMI FL 33142 MIAMI FL 33142 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/04/1993 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0410515 Not Applicable 21 Suite. Apt. #. etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 Country Country This corporation owes or has paid the current year Intangible Zip Personal Property Tax due June 30. Yes Yes ☐ No 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name SIGERMAN, MICHAEL **5761 NORTHWEST 37TH AVENUE** Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33142** Zip Code 64 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE TIFLE 1.1 TITLE SIGERMAN, MICHAEL 1.2 NAME NAME 23880 SW 124TH AVE. 1.3 STREET ADDRESS STREET ADDRESS MIAMI FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ... DELETE 2.1 TITLE TITLE PLOSHNICK, GARY NAME 2.2 NAME 5333 COLLINS AVE. STREET ADDRESS 2.3 STREET ADORESS MIAMI BCH. FL 2.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-ZIP Addition Change DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-ZIP DELETE ☐ Change □ Addition B 1 TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP

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 received 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 2 on an attraction with an address.

SIGNATURE:

MICHAEL SIGERMANX 4-8-98 -