FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

APPROVED AND FILED
95 MAY -1 AM 3:07
SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P93000057517 (3)

1. Corporation Name

KALE PROPERTIES, INC.

Principal Place of Business	Mailing Address
4545 N OCEAN BLVD #16-D BOCA RATON FL 33431	4545 N OCEAN BLVD #16-D BOCA RATON FL 33431

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/12/1993	3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0439645	Applied For / Not Applicable
5. Certificate of Status Desired ☐	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business (21) / 2a. Mailing Address (26)
Suite, Apt. #, etc. (22) / (27)
City & State (23) / (28)
Zip (24) Country (25) / Zip (29) Country (30)

9. Name and Address of Current Registered Agent

FINKEL, EMANUEL M
4545 N. OCEAN BLVD.
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	ST	☐ Change ☐ Addition
NAME	FINKEL, EMANUEL M	
STREET ADDRESS	4545 N. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	D	☐ Change ☐ Addition
NAME	BARRIE, NANCY S	
STREET ADDRESS	6 WESTGATE RD.	
CITY-ST-ZIP	LIVINGSTON NJ 07039	
TITLE	D	☐ Change ☐ Addition
NAME	EPSTEIN, JOYCE F	
STREET ADDRESS	R.D. 2 BOX 634	
CITY-ST-ZIP	ANDOVER NJ 07821	
TITLE	P	P MARTIN D. FINKEL ☒ Change ☐ Addition
NAME	FINNEL, MARTIN D	1622 SUNNYBROOK LANE
STREET ADDRESS	1737 W. 25TH ST.	CLEARWATER, FL 34624
CITY-ST-ZIP	MIAMI BEACH FL 33140	
TITLE	ST	☐ Change ☐ Addition
NAME	FINKEL, EMANUEL	
STREET ADDRESS	4545 N. OCEAN BLVD.	
CITY-ST-ZIP	BOCA RATON FL 33431	
TITLE	D	☒ Change ☐ Addition
NAME	BARRIE, NANCY S	Delete -
STREET ADDRESS	6 WESTGATE RD.	Repeated in Error
CITY-ST-ZIP	LIVINGSTON NJ 07039	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(k), Florida Statutes. I further certify that the information indicated on the 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] MARTIN D. FINKEL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #: 813-535-5845

0256450 CP