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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

P93000075032 (1)

D.F. REALTY, INC.

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing do indicated on this annual report or supplemental annual report officer or director of the corporation or the receiver or trusted Block 12 or Block 13 if changed, or on an attachment with In

Principal Place of Business Mailing Address 3400 ONE BISCAYNE TOWER 3400 ONE BISCAYNE TOWER TWO SOUTH BISCAYNE BLVD. TWO SOUTH BISCAYNE BLVD. DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified <u>10/28/1993</u> 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 Not Applicable 26 65-0461268 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name VALDES-FAULI CORPORATE SERVICES INC 3400 ONE BISCAYNE TOWER 82 Street Address (P.O. Box Number is Not Acceptable) TWO SOUTH BISCAYNE BLVD. 83 **MIAMI FL 33131** 84 City 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** (NOTE: Registered Agent signature required whon reinstating) Signature, typed or printed narrie of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETÉ TITLE DS 1.1 TITLE Change Addition DE FILIPPO, GIOVANNI NAMÉ 1.2 NAME ONE BISCAYNE TOWER TWO S. BISCAYNE BLVD. STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE DE FILIPPO, GLAUCO NAME 2.2 NAME ONE BISCAYNE TOWER TWO S. BISCAYNE BLVD. STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2. 4 CITY - ST - ZIP DELETE Change Addition TITLE 3.1 TITLE DE FILIPPO, MAURO 3.2 NAME ONE BISCAYNE TOWER TWO S. BISCAYNE BLVD. STREET ADDRESS 3 3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

FILED Apr 15 1998 8:00am Secretary of State



not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in threes. Moles