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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortnam
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # P9400002612 (7)

J & L BEACH REALTY INC.

Principal Place of Business Mailing Address							**************************************		
1228 ALTON ROAD MIAMI BEACH FL 33139		1228 ALTON ROAD Miami Beach FL 33139							
						3. Date incorporated or Qualified 01/11/1994	3a. Date of Last 04/18/1		
Principal Place of Business     Section 21		2a. Mailing Address 26				4. FEI Number 65-0460111	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite. Apt. #, etc. 27				5. Certificate of Status Desired	1 1	75 Additional e Required	
City & State		City & State			<b>6.</b> Election Campaign Financing Trust Fund Contribution		<b>00</b> May Be led to Fees		
Ζφ <b>24</b>	Country <b>25</b>	Ζρ <b>29</b>	30 Co	untry		8. This corporation has liability for i Florida Statutes Z Yes	-	s 199.032,	
	g. Name and Address of Curren	t Registered Agent				10. Name and Address of New R	egistered Agent		
				81	Name				
	EO JR.,ESQ		82 Street Addres		Street Addr	ess (P.O. Box Number is Not Acceptab	le)		
	ICOLN ROAD			83					
SUITE 5				63					
MIAMI B	EACH FL 33139			84	City		F1 85	Zip Code	
familiar with SIGNATURE:	i, and accept the obligations of, Secti	on 607.0505, Florida Staluter	S.			abon submits this statement for the pur d of directors. I hereby accept the appo	pose of changing it pintment as register	s registered office ed agent. I am	
	Signature Types Or protestical coloning son it alkali				il Sognative technes	Swheriter (Stand)	DATE	TODO IN 10	
12.	OFFICERS ANS	DELETE	13.	T TLF	T	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECT		
NAME	ROSE, LEO JR.,ESO	Drugg		NAME	ĺ		C 2-mile	·	
STREET ADDRESS	1111 LINCOLN ROAD, SUITE	500			ADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL 33139			C 11-S					
THILE	D	DELETE.		TITLE	7 57		Chang	e 🔲 Addition	
NAME	ROSE, ELLEN ESO.		221	NAME					
STHEET ADDRESS	1111 LINCOLN ROAD, SUITE	500	233	STREET	ADDRESS				
CITY+ST-ZIP	MIAMI BEACH FL 33139		24	CI'Y-S	i - 71 <sup>61</sup>				
TITLE	PRES	☐ DELETE	3 1	HHE			☐ Chang	e 🔲 Addition	
NAME	RESNICK, JAMES		321	NAME					
STREET ADDRESS	1228 ALTON ROAD		33	STREET	LADDRESS				
CITY-ST-ZIP	MIAMI BEACH FL	FT 1.5.555		CHY-S	1-7IP				
TITLE		☐ DELETE	1	THICE			Chang	e	
NAME				NAME					
STREET ADORESS					ADDRESS				
CITY - ST - ZIP		DELETE		CITY - S THILE	ot Zit:		Chang	e	
NAME			t	NAME					
STREET ADDRESS			l		ADDRESS				
CITY-ST-ZIP				City - S					
TILE		DELETE		TITLE	· · · · · · · · · · · · · · · · · · ·		Chang	e 🔲 Addition	
NAME			6.2	NAME					
STREET ADDRESS			6.3	STREEL	ADDRESS				
CITY - ST - ZIP			64	CITY - S	SI - 71F				
certify that oath, that I	the information indicated on this anni-	ial report or supplemental and ration or the receiver or trusts	nual report ee empow	t is to	ie and accura	for the exemption stated in Section 119, ito and that my signature shall have the is report as required by Chapter 607, Fl	same legal effect a	s if made under	

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-8-96

305-6734981

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