

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

PROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **P94000042424 (9)**

1. Corporation Name  
**JLT REALTY CORP.**



Principal Place of Business: **1000 QUAYSIDE TERR APT 603 MIAMI FL 33138**  
Mailing Address: **1000 QUAYSIDE TERR APT 603 MIAMI FL 33138**

3. Date Incorporated or Qualified: **06/07/1994**  
3a. Date of Last Report: **01/31/1995**  
4. FEI Number: **65-0495995**  
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 State, Apt. #, etc.; 22 City & State; 23 Zip; 24 Country  
2a. Mailing Address: 26 State, Apt. #, etc.; 27 City & State; 28 Zip; 29 Country

9. Name and Address of Current Registered Agent  
**SILBERMAN, GARY  
1750 NE 167 ST  
SUITE 1530  
N MIAMI BEACH FL 33162**

10. Name and Address of New Registered Agent  
81 Name: **Julius Telowitz**  
82 Street Address (P.O. Box Number is Not Acceptable): **1000 Quayside Terrace**  
83 Apt: **APT 603**  
84 City: **Miami** FL 85 Zip Code: **33138**

11. Pursuant to the provisions of Sections 607.0902 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: *Julius Telowitz*

12. OFFICERS AND DIRECTORS  
1. Title: **D**  
NAME: **TELOWITZ, JULIUS**  
STREET ADDRESS: **1000 QUAYSIDE TERR APT 603 MIAMI FL 33138**  
2. Title: **D**  
NAME: **TELOWITZ, FAY**  
STREET ADDRESS: **1000 QUAYSIDE TERR APT 603 MIAMI FL 33138**  
3. Title: **D**  
NAME: **ATTERMAN, GAIL**  
STREET ADDRESS: **1000 QUAYSIDE TERR APT 603 MIAMI FL 33138**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
1.1 TITLE:  Change  Addition  
1.2 NAME:  
1.3 STREET ADDRESS:  
1.4 CITY - ST - ZIP:  
2.1 TITLE:  Change  Addition  
2.2 NAME:  
2.3 STREET ADDRESS:  
2.4 CITY - ST - ZIP:  
3.1 TITLE:  Change  Addition  
3.2 NAME:  
3.3 STREET ADDRESS:  
3.4 CITY - ST - ZIP:  
4.1 TITLE:  Change  Addition  
4.2 NAME:  
4.3 STREET ADDRESS:  
4.4 CITY - ST - ZIP:  
5.1 TITLE:  Change  Addition  
5.2 NAME:  
5.3 STREET ADDRESS:  
5.4 CITY - ST - ZIP:  
6.1 TITLE:  Change  Addition  
6.2 NAME:  
6.3 STREET ADDRESS:  
6.4 CITY - ST - ZIP:

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(3)(k), 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 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: *Julius Telowitz* PRES. 2/2/96 893-3487  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)