FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name

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Zip

P94000074049 (5)

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REAL ESTATE INVESTMENT & FINANCING, INC.

Principal Place of Business Mailing Address 848 BRICKELL AVENUE **848 BRICKELL AVENUE** DO NOT WRITE IN THIS SPACE MIAMI FL 33131 MIAMI FL 33131 3. Date Incorporated or Qualified 10/05/1994 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0542970 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be

Country

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24 25 9. Name and Address of Current Registered Agent MANN, EDGARD 848 BRICKELL AVENUE SUITE 400 **MIAMI FL 33131**

	Personal Property Tax due June 30. 🗹 Yes 🔲 No	
Ì	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	

8. This corporation owes or has paid the current year Intangible

Trust Fund Contribution

FILED

Apr 13 1998 8:00am

Secretary of State

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	Signature, typod or printed name of registered agent and title diapplic.	ALOTE I	Registered Agent signature rec		DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFIC		S IN 12
TITLE	D	DELETE	1.1 TITLE		Change	Addition
NAME	Mann, Ed g ard		1.2 NAME			
STREET ADDRESS	848 BRICKELL AVENUE SUITE 400		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL		1.4 CłTY - ST - ZłP			
TOLE	Ō	DELETE	2.1 TITLE		Change	Addition
NAME	TERRY W. CLAUS		2.2 NAME			
STREET ADDRESS	1390 \$ DIXIE HWY		2.3 STREET ADDRESS			
CITY-ST-ZIP	CORAL GABLES FL		2. 4 Crty-St-ZiP			
TITLE		DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		DEFELE	4.1 TOTLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

14. Thereby certify that the information supplied with this filing does no indicated on this annual report or supplieriental artifuel report is true officer or director of the corporation or the receiver of trustee empt Block 12 or Block 13 if changed or or an attachment with an agent. of a valify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an avered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

SIGNATURE:

Amil 6, 1990

Added to Fees