FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 MAY 12 AM 9:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **P94000082840 (7)**

1. Corporation Name
SIMRAY REAL ESTATE MANAGEMENT, INC.

Principal Place of Business	Mailing Address
12955 BISCAYNE BLVD. PENTHOUSE A NORTH MIAMI FL 33181	12955 BISCAYNE BLVD. PENTHOUSE A NORTH MIAMI FL 33181

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/14/1994
3a. Date of Last Report:

2. Principal Place of Business	2a. Mailing Address
21 12955 BISCAYNE BLVD	26 12955 BISCAYNE BLVD
Suite, Apt. #, etc. 22 SUITE #406	Suite, Apt. #, etc. 27 SUITE #406
City & State 23 N. MIAMI, FL	City & State 28 N. MIAMI, FL
Zip / Country 24 33181 / 25 U.S.A.	Zip / Country 29 33181 / 30 U.S.A.

4. FEI Number: 65-0544969 ☐ 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

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
TOURGEMAN, RAMON 28 W. FLAGLER ST., #666 MIAMI FL 33130	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DVT	11 TITLE	☐ Change ☐ Addition
NAME	EVANS, RAYMOND A	12 NAME	
STREET ADDRESS	12955 BISCAYNE BLVD., PENTHOUSE A	13 STREET ADDRESS	12955 BISCAYNE BLVD. SUITE #406
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33181	14 CITY-ST-ZIP	
TITLE	DPS	21 TITLE	☐ Change ☐ Addition
NAME	MUNDLAK, SIMON M	22 NAME	
STREET ADDRESS	12955 BISCAYNE BLVD., PENTHOUSE A	23 STREET ADDRESS	12955 BISCAYNE BLVD SUITE #406
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33181	24 CITY-ST-ZIP	
TITLE		31 TITLE	☐ Change ☐ Addition
NAME		32 NAME	300001450385
STREET ADDRESS		33 STREET ADDRESS	-05/17/95--01034--014
CITY-ST-ZIP		34 CITY-ST-ZIP	****225.00 ****225.00
TITLE		41 TITLE	☐ Change ☐ Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY-ST-ZIP		44 CITY-ST-ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	5/12/95 MST
CITY-ST-ZIP		64 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: [signature] Simon M. Mundlak 5/10/95 (305)8935733
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0100473 CR