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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # P94000089192 (6)

CORNELL PROPERTIES, INC.

Principal Place of Business Mailing Address **3801 N 41ST AVE** 3801 N 41ST AVE HOLLYWOOD FL 33021-1842 HOLLYWOOD FL 33021 3. Date Incorporated or Qualified 3a. Date of Last Report 12/09/1994 03/12/1996 2. Principal Prace of Business 4. FEI Number 2a. Mailing Address Applied For 65-0555991 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zio Country 760 Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MORRIS RICHTER Name 3801 N 41ST AVE 82 Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33021 83 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 Signature. Expect or printed name of registered agent and title Lapp icable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)OFFICERS AND DIRECTORS 13. Addition TITLE DELETE 1.1 TITLE Change RICHTER, MORRIS 1.2 NAME CR2E034 3801 N 41ST AVE STREET ADDRESS 1.3 STREET ADDRESS HOLLYWOOD FL CHY-ST-78 1.4 CITY-ST-ZIP Change DELETE Addition 2 1 TITLE HILF 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP CHY-51-20 DELETE Change TITLE 3.1 TITLE Addition 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - \$1 - 7/P 3.4. CITY-ST-ZIP ☐ Change DELETE Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADORESS 4.3 STREET ADDRESS COLY-ST 20 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 City-ST-ZIP

14. Les hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 chapted or on an attachment with an address.

SIGNATURE:

STREET ADDRESS

CHY-ST ZIP

EAND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR
HORKIS RICHTER

3/10/97

954-568-4/18 Deviling Phone #

FILED

Apr 11 1997 8:00am

Secretary of State

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