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

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000060357 (7)

KAIL REAL ESTATE, INC.

Principal Place of Business

Mailing Address

85 N.E. 40TH STREET STE. 803 MIAMI FL 83137 US

401 OCEAN DRIVE

MIAMI BEACH FL 33139-6644

3. Date Incorporated or Qualified 3a. Date of Last Report

08/04/1995

FILED

May 07 1997 8:00am

Secretary of State

08/09/1996

2. Principal Pla		28. Mailing Address			4. FEI Number 65-0602795			oplied For of Applicable
Suite, Apt. #					5. Certificate of Status Desired		\$8.75 A	Additional
City & State City & State 3 Migmi, FL 28					6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
24 33 13	7 25 USA 29 30			ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
g. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
1/10		8	1 Name	10, Maine and Address of New Til	giatorou	ngent		
POUL, ERIO M				or Name				
401 OCEAN DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI BEACH FL 33139				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 agent the obligations of, Soption 607.0505, Florida statutes.								
7 11/1 1								
SIGNATURE S	Ilgnature, typed or printed name of registered agen	and title if applicable. (NOTE	: flegislered A	gent signaturo requir	red when reinstating)	JATE	L.f	
12.	OFFICERS AND		13.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFI	CERS AN	O DIRECTOR	IS IN 12
TITLE	D	DELETE	1,1 1/1LE				Change	Addition
NAME	KAIL, ERIC M		1.2 NAM	E				3
STREET ADDRESS	401 OCEAN DRIVE #601		1.3 STRE	E1 ADDRESS				18
CITY-ST-2IP	MIAMI BEACH FL 33139		1,4 CITY	- ST - ZIP				٤
TITLE	DELETE 2.17		2.1 TITLE		* -		Change	Addition
NAME			2.2 NAM	[]				Ī
STREET ADDRESS			2351RE	ET ADDRESS				
CITY-ST-ZIP			2. 4 CITY	'-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				Change	☐ Addition
NAME			3.2 NAMI	E)				
STREET ADDRESS			3.3 STRE	ET ADDRESS				
CITY-ST-ZIP			3.4. CITY	'- ST- ZIP				
TITLE		DELFTE	4.1 TITLE				Change	L Addition
NAME			4. 2 NAM	lE				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CITY-ST-ZIP			4.4 DITY	- S1 - ZIP				
TITLE		DELETE	5.1 TITLE				Change	Addition
NAME			5 2 NAMI	Ε				
STREET ADDRESS	₹ ¹		5.3 \$18E	ET ADDRESS				Ì
CITY-ST-ZIP	<i></i>		5.4 CITY					
TITLE		DELETE	6.1 TITLE			····	Change	Addition
NAME			6.2 NAMI	l l			•	
STREET ADDRESS			6.3 \$ 1RE	E1 ADDRESS)
CITY-ST-ZIP			6.4 CITY	1				
	y certify that the information supplied	with this filing does not qualif			d in Section 119.07(3)(i), Florida Statuti	es. I furthe	r certify that	the

Information indicated on this annual report or supplemental annual report is tribe 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 trusted 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.