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**FILED** Apr 16 1998 8:00am PROFIT ELORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT** # P95000066826 (5) MOR REALTY, INC. Principal Place of Business Mailing Address 1500 BAY RD., STE, 683 1500 BAY RD., STE. 693 MIAMI BEACH FL 33139 MIAMI BEACH FL 33139 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/23/1995 2. Principal Place of Business 2a, Mailing Address 4. FEI Number Applied For 26 65-0625902 Not Applicable 21 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 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. Yes 29 24 25 10. Name and Address of New Registered Agent g. Name and Address of Current Registered Agent BERLIT CORPORATE SERVICES, INC. ZEEV MルKS 848 BRICKELL AVE., SUITE 200 Street Address (P.O. Box Number is Not Acceptable) 82 **MIAMI FL 33131** 83 MIAMI BEACH 33139 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. 10/98 or printed name of registered agent and title if applicable (NOTE Registers) Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13 12 DELETE 1.1 TUE Change Addition TITLE 1.2 IAME MILKIS, ZEEV NAME 1500 BAY RD., STE. 693 1.3 TREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33142 1.4 FTY-ST-ZIP CITY-ST-ZIP DELETE 2.11TLE Change Addition TITLE 2.2 AME NAME 2.3 TREET ADDRESS STREET ADDRESS 2. \$ITY-ST-ZIP CITY-ST-ZIP DELETE 3. UTLE Change ☐ Addition TITLE NAME 3.3 REET ADDRESS STREET ADDRESS TY - ST - ZIP CITY-ST-ZIP DELETE Change ☐ Addition TITLE NAME REET ADORESS STREET ADDRESS Y-ST-ZIP CITY-S1-ZIP DELETE Change Addition TITLE NAME EET ADDRESS STREET ADDRESS Y-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE NAME

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14. I hereby certify that the information supplied with this filing does not qualify for the onplion stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate. That my signature shall have the same legal effect as if made under ceth; that I am an officer or director of the corporation or the receiver or trustee empowered to executive 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. /- ST- ZIP