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PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000076797 (6)

BRJ PROPERTIES, INC.

## FILED May 13 1997 8:00am Secretary of State

| Principal Place of Business Mailing Ad-  |   |  | Address  |           |                  | 1 (0)110)1 110 10101 0111 00111 00111 00111 00111 00111 10010 01111 10016 10111 1001   |  |  |
|--|---|--|--|-----------|------------------|--|--|--|
| 11120 N KEND<br>MIAMI FL 8317  | iall dr. Suite 201<br>16                            | 11120 N KENDALL DR. :<br>Miami FL 33176-0941     | 11120 N KENDALL DR. SUITE 201<br>Miami Fl 33176-0941 |           |                  |  |  |  |
|  |   |  |  |           |                  | 3. Date Incorporated or Qualified 3a. Date of East Report 10/02/1995 10/09/1996  |  |  |
|  | lace of Business                                    | 2a. Mailing Address                              |  |           |                  | 4. FEI Number Applied For 65-0613799 Not Applied be  |  |  |
| 21<br>Suite, Apt.  | #. etc.   | Suite, Apt. #, etc.                              | Suite, Apt. #, etc.                                  |           |                  | CD 75 August   |  |  |
| 22   |   |  | 27   |           |                  | 5. Certificate of Status Desired Fee Required  |  |  |
| City & State   | 9   | City & State                                     |  |           |                  | 6. Election Campaign Financing \$5.00 May Be   |  |  |
| 23   |   | 28   |  |           | ·····            | Trust Fund Contribution  |  |  |
| Zip  | Country Z+p   |  |  | Country   |                  | 8. This corporation has liability for intangible tax under s. 199.032,   |  |  |
| 24   | 25 9. Name and Address of Curre                     | nt Registered Agent                              | 30   | 30        |                  | Florida Statutes X Yes No  10, Name and Address of New Registered Agent  |  |  |
| DAC  | HLIN, BOB   | iii nagistalaa Agant                             |  | 81        | Name             | 10. Name and Address of New Registered Agent   |  |  |
|  | 20 N KENDALL DR, SUITE 201                          |  |  |           |                  |  |  |  |
|  | MI FL 33176   |  |  | 82        | Street Ad        | ddress (P.O. Box Number is Not Acceptable)   |  |  |
| 1,,,,  |   |  |  | 83        |                  | MM/ 155-141  |  |  |
|  |   |  |  | 84        | City             | let Zu Code  |  |  |
|  |   |  |  |           |                  | FL 85 Zip Code   |  |  |
| 11. Pursuant to  | to the provisions of Sections 607.05                | 02 and 607.1508, Florida Stati                   | utes, the al   | bovi      | e-riamed co      | corporation submits this statement for the purpose of changing its registered<br>oration's board of directors. I hereby accept the appointment as registered |  |  |
| ∤agent. Ia   | m familiar with, and accept the oblig               | gations of, Section 607.0505, F                  | lorida Stat  | tute      | s.               | prations board or directors. Thereby accept the appointment as registered  |  |  |
| SIGNATURE  | <u> </u>  |  |  |           |                  |  |  |  |
| 12.  | Signature, typical or printed name of registered as | gent and tillo if applicable (NC<br>VD DIRECTORS | Hegistere  | d Age     | ent signature re | equired when reinstaling)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   |  |  |
| TITLE  | D   | DELETE   | 1.1 71   | ILE       |                  | Change Addition  |  |  |
| NAME   | RACHLIN, BOB  |  | 1.2 N  |           |                  | _ round  |  |  |
| STREET ADDRESS   | 11120 N KENDALL DR, SUITI                           | E <b>2</b> 01                                    | 1.3 STREET ADDRESS                                   |           | ADDRESS          |  |  |  |
| CITY-ST-ZIP  | MIAMI FL 33176                                      |  | 1.4 CI   | ITY-S     | ST - 7/P         |  |  |  |
| TITLE  | D   | ☐ DELLIE   | 2.1 1  | ΤL€       | _                | Change Addition  |  |  |
| NAME   | WEISSMAN, JERRY                                     |  | 2.2 N/   | λМξ       |                  |  |  |  |
| STREET ADDRESS   | 11120 N KENDALL DR, SUITI                           | E 201  | 2.3 \$1  | IREEI     | ADDRESS          |  |  |  |
| CHY-ST-ZIP   | MIAMI FL 33176                                      | DOLLETE  |  |           | ST - 7/P         |  |  |  |
| TITLE<br>NAME  |   | L] DELETE  | 3.1 1  |           |                  | L] Change L] Addition  |  |  |
| STREET ADDRESS   |   |  | 3.2 N/   |           | ADDRESS          |  |  |  |
| CITY-ST-ZIP  |   |  | 3.3 STREET ADDRESS  3.4. CITY - ST - ZIP             |           |                  |  |  |  |
| TITLE  |   | DELETE   |  | 4.1 TITLE |                  | Change Addition  |  |  |
| NAME   |   |  | 4. ₽ N   | 4. ₽ NAME |                  | ·  |  |  |
| STREET ADDRESS   |   |  | 4.3 ST   | IREET     | ADDRESS          |  |  |  |
| CITY-ST-ZIP  |   |  | 4.4 CHY - ST - ZIP                                   |           | 5T - Z(P         |  |  |  |
| TITLE  |   | ☐ DELET€   | 5.1 1  | HF        |                  | ☐ Change ☐ Addilion  |  |  |
| NAME   |   |  | 5.2 N/   | AME       |                  |  |  |  |
| STREET ADDRESS   |   |  | 5.3 S1   | TREET     | ADDRESS          |  |  |  |
| CITY-ST-ZIP  |   | Doce   |  |           | 51 - ZIP         |  |  |  |
| TITLE  |   | ☐ DELETE   | 6.1 Ti   |           |                  | L] Change L] Addition  |  |  |
| NAME<br>Street adoress   |   |  | 6.2 N/   |           | 1DODE CO         |  |  |  |
| CITY-ST-ZIP  |   |  |  |           | ADDRESS          |  |  |  |
| 14. I do hereb   | by certify that the information supplied            | od with this filing does not aua                 | 6.4 Ci<br>dify for the                               | exe       | mption sta       | aled 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 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 truston empoyment to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter, or or an attachment with an adversarial supplemental and statutes. |   |  |  |           |                  |  |  |  |