FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

FLORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortnam ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1996 P95000077471 **DOCUMENT #** EUROPEAN REAL ESTATE ASSET MANAGEMENT CORPORATIO Mailing Address Principal Place of Business 9700 N.W. 48TH DRIVE 9700 N.W. 48TH DRIVE CORAL SPRINGS FL 33067 CORAL SPRINGS FL 33067 3a. Date of Last Report 3. Date Incorporated or Qualified 10/09/1995 X Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business 65-06 32300 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 27 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State \Box Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Country Ζıρ Yes No Florida Statutes 30 29 25 10. Name and Address of New Registered Agent 24 9. Name and Address of Current Registered Agent Name Egic Dessem
Street Address (P.O. Box Number is Not Acceptable)
9700 NW 48 H Daive HOBERMAN, JENNIFER M 82 3400 NE, 192ND ST. 93 G SUTTE 1540 Zip Code 33cらみ MKAMI FL 33(180 ON CERNE Speings 84 11. Pursuant to the provisions of Sections £07 0502 and £07.1506, 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. Thereby accept the appointment as registered agent. Lami familiar with, and adrespt the obligations of Section £07.0505, Florida Statutes. Opril 23, 1996 SIGNATURE CR2E034 (12/95) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. OFFICERS AND DIRECTORS 12. Change Paraclent / Secretary / Theasure DELETE 1 1 TIL F TITLE Eure E. E. Bessem 1.2 NAMS NAME 3700 NW 48th Drive 1.3 STHELF ADDRESS STREET ADDRESS Corak opulas, FL 33067 1.4 City St - ZiP ne-fibbA [Change CITY - ST - ZIP DELFIE 2.1 Till E TITLE 2.2 NAME NAME 2.3 STHEEL ADDRESS STREET ADDRESS 2.4 CiTY - ST - ZiP Change Addition CITY-ST-ZIP DELETE TITLE 3.2 NAME NAME 3.3 STHEET ADDRESS STREET ADDRESS 3 4 CITY - ST-ZIP ☐ Change Addition CITY ST-ZIP DELETE 4 1 T T LE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 C:1Y S1-ZIP Add tion C-TY-ST-ZIP Change DELETE 5 1 Tille TIFLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 3**00001847493** -06/03/96--01028--083³³ 5 4 CITY - ST - ZIP CITY - ST - ZIF DELETE 6 1 THEF TITLE ***208.08 6.3 STREET ADDRESS STREET ADDRESS

6.4 CHY-S1-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 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 certify 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

Enic E. Bossen Opril 23, 1991

dianged, or on an attachment with an address.

SIGNATURE: