

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000093312 (3)

1. Corporation Name

THE REAL-WAY COMPANIES, INC.



Principal Place of Business

3500 NORTH STATE ROAD 7  
SUITE 100  
FT. LAUDERDALE FL 33319

Mailing Address

3500 NORTH STATE ROAD 7  
SUITE 100  
FT. LAUDERDALE FL 33319

3. Date Incorporated or Qualified  
12/07/1995

3a. Date of Last Report

2. Principal Place of Business

21 7177 W. OAKLAND PARK BLVD

2a. Mailing Address

26 P.O. BOX 16866

4. FEI Number

65-0628061

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

City & State

23 FORT LAUDERDALE, FLA

City & State

28 PLANTATION, FLA

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

Zip Country

24 33313

Zip Country

29 33318

Country

30

8. This corporation has liability for intangible tax under s 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOOMAR, L G  
2875 S. UNIVERSITY DRIVE  
DAVIE FL 33328

81 Name

B. I. RUBIN

82 Street Address (P.O. Box Number is Not Acceptable)

7177 W. OAKLAND PARK BLVD

83

P.O. BOX 16866

84

PLANTATION

FL

85 Zip Code

33318

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:

*B. I. Rubin*

(NOTE: Registered Agent signature required when reinstating)

4-23-96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE

NAME RUBIN, MARLENE  
STREET ADDRESS 3500 N. STATE ROAD 7 SUITE 100  
CITY-ST-ZIP FT. LAUDERDALE FL 33319

1.1 TITLE

PRESIDENT

☒ Change

☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

1.2 NAME

B. I. RUBIN

1.3 STREET ADDRESS

7177 WEST OAKLAND PARK BOULEVARD

1.4 CITY-ST-ZIP

FT. LAUDERDALE, FLA 33313

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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 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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-96

Date

(954) 746-4000

Daytime Phone #

CR2E034 (12/95)