

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

FILED
May 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000014301 (1)

1. Corporation Name

FIRST COMMERCIAL REALTY, INC.



Principal Place of Business 1400 N.W. 107TH AVENUE MIAMI FL 33172	Mailing Address 1400 N.W. 107TH AVENUE MIAMI FL 33172-2748
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 02/14/1996		3a. Date of Last Report	
4. FEI Number		☒ Applied For ☐ Not Applicable		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No					
9. Name and Address of Current Registered Agent LEVY, JOEL 1400 N.W. 107TH AVENUE MIAMI FL 33172				10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	☐ DELETE	11 TITLE	☐ Change ☒ Addition
NAME		12 NAME	D/P Adler, Michael M.
STREET ADDRESS		13 STREET ADDRESS	1400 NW 107 AVE.
CITY-ST-ZIP		14 CITY-ST-ZIP	Miami, FL 33172
TITLE	☐ DELETE	21 TITLE	☐ Change ☒ Addition
NAME		22 NAME	D/EV /AS Levy, Joel
STREET ADDRESS		23 STREET ADDRESS	1400 NW 107 AVE.
CITY-ST-ZIP		24 CITY-ST-ZIP	Miami, FL 33172
TITLE	☐ DELETE	31 TITLE	☐ Change ☒ Addition
NAME		32 NAME	D/S/T Arrizurieta, Luis
STREET ADDRESS		33 STREET ADDRESS	1400 NW 107 AVE.
CITY-ST-ZIP		34 CITY-ST-ZIP	Miami, FL 33172
TITLE	☐ DELETE	41 TITLE	☐ Change ☒ Addition
NAME		42 NAME	AS Adler, Linda K.
STREET ADDRESS		43 STREET ADDRESS	1400 NW 107 AVE.
CITY-ST-ZIP		44 CITY-ST-ZIP	Miami, FL 33172
TITLE	☐ DELETE	51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption 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 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: Linda Adler 4/28/97 305-392-4050
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #