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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P96000077425 (2) DOCUMENT # 1. Corporation Name

Country

EFK PROPERTIES, INC.

Principal Place of Business 5701 N PINE ISLAND ROAD STE 250 FT LAUDERDALE FL 33321

2. Principal Place of Business

Suite, Apt. #. etc.

City & State

21

23

Zip

Mailing Address

PO BOX 26323 TAMARAC FL 33320

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

## **FILED** Jan 22 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

8. This corporation owes or has paid the current year Intangible

3. Date Incorporated or Qualified 09/16/1996

65-0696526

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

4. FEI Number

24	25	29	30			Personal Property Tax due June 30.  Yes No	
	<ol><li>Name and Address of Current I</li></ol>	Registered Agent		<u> </u>		10. Name and Address of New Registered Agent	
EIS	ENBEG, JAY			81	Name		
5701 N PINE ISLAND ROAD STE 250				82	Stroot Ac	ddress (P.O. Box Number is Not Acceptable)	
TAMARAC FL 33320				32	Olicel Ad	duress (F.O. bux Number is Not Acceptable)	
				83			
				84	City	FL 85 Zip Code	
11, Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Sta	tutes, the a	bove	-named co	orporation submits this statement for the purpose of changing its registere	
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS AND I		13.	•		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	Р	☐ DELETE	1.1 T	ITLE		Change Addition	
NAME	EISENBERG, JAY		1.2 N	AME			
STREET ADDRESS	P O BOX 26323 N/A,5701 N. PI	NE ISLAND DR	1.3 S	TREET	ADDRESS		
CITY - ST - ZIP	TAMARAC FL 33320		140	ity-si	i - 7iP		
TITLE	VP	☐ DELETE	2.1 T			☐ Change ☐ Addition	
NAME	KIRSH, RICHARD		2.2 N	AME	İ		
STREET ADDRESS	469 W 83 STREET		2.3 \$	TREET	ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33014		2.40	CITY - S	T- ZIP	eta j	
TITLE	T	☐ DELETE	3.1 T	ITLE		☐ Change ☐ Addition	
NAME	FIUR, LESLIE		3.2 N	AME			
STREET ADDRESS	469 W 83 STREET		3.3 S	TREET.	ADDRESS		
CITY-ST-ZIP	HIALEAH FL 33014		3.4. 0	ITY-S	T-ZIP		
TITLE		DELETE	4,1 Ti	TLE		☐ Change ☐ Addition	
NAME			4.21	AME			
STREET ADDRESS			4.3 S	TREET.	ADDRESS		
CITY-ST-ZIP			4.4 C	ITY-ST	7-2IP		
TITLE		DELETE	5.1 Ti			Change Addition	
NAME			5.2 N	AME	ļ		
STREET ADDRESS			5.3 \$	TREET	ADDRESS		
CITY-ST-ZIP			5.4 C	1TY-S1	I-ZIP		
TITLE		DELETE	5.1 TI	TLE		☐ Change ☐ Addition	
NAME			6.2 N	AME			
STREET ADDRESS			6.3 S	TREET	ADDRESS		
CITY-ST-ZIP				(TY-S)			
14. I 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.							

Country

SIGNATURE:

9577205558

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable