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FILED
Mar 20 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000100026 (9)

1. Corporation Name

REEDOM REAL ESTATE MANAGEMENT, INC.

Principal Place of Business

450 WEST PARK ROAD STE 400
HOLLYWOOD FL 33021

Mailing Address

450 WEST PARK ROAD STE 400
HOLLYWOOD FL 33021-6919

3. Date Incorporated or Qualified

12/11/1996

3a. Date of Last Report

4. FEI Number
65-0713044

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21 917 N. Federal Hwy.

Suite, Apt. #, etc.

22 City & State

23 Hollywood, FL

24 Zip

33020

County

25

2a. Mailing Address

26 917 N. Federal Hwy.

Suite, Apt. #, etc.

27 City & State

28 Hollywood, FL

29 Zip

33020

Country

30

9. Name and Address of Current Registered Agent

MARTIN G. BROOKS PA
450 WEST PARK ROAD STE 400
HOLLYWOOD FL 33021

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

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

Signature of Agent for purpose of new or changed registered agent and office (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE
D	BROOKS, MARTIN G	450 WEST PARK ROAD STE 400	HOLLYWOOD FL 33021	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-STATE-ZIP	DELETE	Change	Addition
1.1	President	CSABA FERENCZI	917 N. Federal Highway		<input type="checkbox"/>	<input checked="" type="checkbox"/>
1.2						
1.3						
1.4						
2.1	Secretary/Treasurer	CRISTINA MONARO	917 N. Federal Highway		<input type="checkbox"/>	<input checked="" type="checkbox"/>
2.2						
2.3						
2.4						
3.1					<input type="checkbox"/>	<input type="checkbox"/>
3.2						
3.3						
3.4						
4.1					<input type="checkbox"/>	<input type="checkbox"/>
4.2						
4.3						
4.4						
5.1					<input type="checkbox"/>	<input type="checkbox"/>
5.2						
5.3						
5.4						
6.1					<input type="checkbox"/>	<input type="checkbox"/>
6.2						
6.3						
6.4						

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:

Dr. Csaba Ferenczi
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97

954-929-3777

Ends

Signature Packet # 0001768

CR2E034 (9/96)