

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

02090

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 05, 1999 8:00 am
Secretary of State

05-05-1999 90010 050 ***150.00

DOCUMENT # P97000031816

1. Corporation Name

SOUTH FLORIDA REALTY AND INVESTMENTS, INC.

Principal Place of Business

4014 CHASE AVE. SUITE 218
STE 220
MIAMI BEACH FL 33141
US

Mailing Address

4014 CHASE AVE. SUITE 218
STE 220
MIAMI BEACH FL 33141
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/07/1997

4. FEI Number

65-0743006

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☒ No

2. Principal Place of Business

21 12550 Biscayne Blvd

Suite, Apt. #, etc.

22 #225

City & State

23 N. Miami, FL.

Zip

24 33181

Country

25 USA

2a. Mailing Address

26 12550 Biscayne Blvd

Suite, Apt. #, etc.

27 #225

City & State

28 N. Miami, FL.

Zip

29 33181

Country

30 USA

9. Name and Address of Current Registered Agent

PORNPRINYA, TONY
10800 BISCAYNE BLVD, SUITE 645
MIAMI FL 33161

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D
BARUCH-COTO, LEA
STREET ADDRESS 4014 CHASE AVE, SUITE 220
CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE ☐ DELETE

NAME VP
COTO, RUBEN A
STREET ADDRESS 4014 CHASE AVE STE 220
CITY-ST-ZIP MIAMI BEACH FL 33141

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

12550 Biscayne Blvd. #225
N. Miami, FL. 33181

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

12550 Biscayne Blvd. #225
N. Miami, FL. 33181

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

LEA BARUCH-COTO

LEA BARUCH-COTO

4/28/99

Date

(305) 893-9934

Daytime Phone #

CR2E034 (1/98)