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

P97000044692 (6) DOCUMENT

WRAC REALTY ASSOCIATES, INC.

Principal Place of Business			
1450 MADRUGA			303
CORAL GARLES	FI 33144	5	

Mailing Address

1450 MADRUGA AVENUE SUITE 303

FILED Feb 16 1998 8:00am Secretary of State



CORAL GABLES FL 33146 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 05/20/1997 4. FEI Number 0763122 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Ζıp Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name COBB, THOMAS C 1399 SW FIRST AVENUE SUITE 400 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33130** 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, typed or printed name of registered agent and title it appliesable (NOTE Registered Agent signature required when reinstaling) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 11 TITLE TITLE COSCULLUELA, EUGENIO J SR NAME 12 NAME 1450 MADRUGA AVENUE SUITE 303 1.3 STREET ADDRESS STREET ADDRESS CORAL GABLES FL 33146 CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE Change Addition 2.1 TITLE TITLE COSCULLUELA, EUGENIO J JR 2.2 NAME NAME STREET ADDRESS 1450 MADRUGA AVENUE SUITE 303 2.3 STREET ADDRESS CORAL GABLES FL 33146 CITY-ST-ZIP 2. 4 City-St-2iP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITL€ TITLE

CITY-ST-ZIP 14. Thereby 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 suppliemental 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 charged, or or all attachment with an address.

5.2 NAME 5.3 STREET ADDRESS

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

DELETE

5.4 CITY - ST - ZIP

SIGNATURE:

NAME

STREET ADDRESS CITY-ST-ZIP

STREET ADDRESS

SIGNATURE

EUGENIO COSCULUELA 01/04/98

308.662.6840

Change

Addition