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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT.

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # **P97000107808**1. Corporation Name

Principal Place of Business

NAME

STREET ADDRESS

CITY-ST-ZIP

BERKMAN REALTY GROUP, INC.

2699 STIRLING ROAD #C306 FT. LAUDERDALE FL 33312		2699 STIRLING ROAD #C306 FT. LAUDERDALE FL 33312				DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or 12/23/1997	Qualifed		
2. Principal Place of Business			2a. Mailing Address				4. FEI Number		A	pplied For
21		26				-	65-0801362		N	lot Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certifcate of Status D	esired \square	·	Additional
22			7			j	j. Certificate of Status D	esileu 🗀	Fee R	tequired
City & State			City & State				6. Election Campaign Fi	nancing	\$5.00	May Be
23			В				Trust Fund Contribution	on 🗀	Added	to Fees
Zip	Country		Zip Country				8. This corporation owes	the current year		_
24	25	29	30			•	Personal Property Tax		☐ Yes	□No
	9. Name and Address of Current	t Registe	ered Agent	81	,		10. Name and Address	of New Registere	ed Agent	•
DOCUMENTO IFFERENCE					Nan	ne		•		•
ROSENBERG, JEFFREY S					Stre	et Addres	ss (P.O. Box Number is No	Acceptable)		
1601 N PALM AVE #109							e the constant			ووالاخراص ويعام
PEMBROKE PINES FL 33026				83			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)			
	•			84	City			F	L 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										
office or r	egistered agent, or both, in the State om familiar with, and accept the obligate	of Florida	i. Such change was auth	ionized by	the co	rporation'	's board of directors. I here	by accept the app	oointment as r	agistered
SIGNATURE										
SIGNATURE	Signature, typed or printed name of registered agent	t and title if a	applicable. (NOTE: Re	egistered Age	nt signatı	w beniupen en	hen reinstating)	DATE		
12.	OFFICERS ANI	D DIREC		13.			ADDITIONS/CHANGES	TO OFFICERS		
TITLE	PVD		☐ DELETE	1,1 TITLE			されが 原設		☐ Change	Addition .
NAME	BERKMAN, MARVIN J			1.2 NAME						
STREET ADDRESS	2699 STIRLING ROAD #C306			1.3 STREE	TADDRE	ss			7	
CITY-ST-ZIP	FT. LAUDERDALE FL 33312	•		1.4 CITY-S	T-ZIP					
TITLE	ST		☐ DELETE	2.1 TITLE		1			☐ Change	☐ Addition
NAME	BERKMAN, ARLENE A			2.2 NAME						i
STREET ADDRESS	2699 STIRLING ROAD #C306			2.3 STREE	TADDRE	ss				
CITY-ST-ZIP	FT. LAUDERDALE FL-33312			2, 4 CITY-5	ST-ZIP.					
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NAME	Control of the contro			3.2 NAME						,
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CITY-ST-ZIP				4.4 CITY-S	T- ZIP	-				1
TITLE			☐ DELETE	5.1 TITLE				- "-	· 🗌 Change	Addition
NAME	·			5.2 NAME					•	
STREET ADDRESS	·			5.3 STREE	T ADDRE	ss				,
CITY-ST-ZIP	野 秦			5.4 CITY-S	T-ZIP		No. of the second			
TITLE	E \$ 257 F 14 C 15. 1652		☐ DELETE	6.1 TITLE					☐ Change	☐ Addition

14. I hereby certify that the information supplied with this filing does not qualfindicated on this annual report or supplied with this filing does not qualfindicated on this annual report is true again officer or director of the corporation of the receiver or trustee empowered Block 12 or Block 13 if changed on an attachment with an address, with for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information courate and that my signature shall have the same legal effect as if made under oath; that I am an o execute this report as required by Chapter 607. Florida Statutes; and that my name appears in all other like empowered

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

Feb 08, 1999 8:00am

Secretary of State

02-08-1999 90019 006 ***150.00