## 2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE:

## Feb 14, 2005 08:00 AM Secretary of State DOCUMENT # P98000051941 1. Entity Name JMW REALTY CORP. Principal Place of Business Mailing Address 362 MINORCA AVENUE 362 MINORCA AVENUE CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 CR2E034 (10/03) 01122005 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0853895 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE WEINER, MORTON D 355 CONSTANERA ROAD CORAL GABLES, FL 33143 IN THIS SPACE 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Added to Fees Trust Fund Contribution. H00000229337 OFFICERS AND DIRECTORS 10. TITLE WEINER, MORTON D NAME 335 COSTANERA ROAD STREET ADDRESS CORAL GABLES, FL 33143 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY - ST - ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS 12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with all other like empowered.

NO TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #