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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000090690

1. Corporation Name

DAVIE CROSSINGS REALTY CORPORATION

Principal Place	of Business	Mailing Address					
7900 MIAMI LAI MIAMI LAKES F	7900 MIAMI LAKES DRIVE WES MIAMI LAKES FL 33016-5897			DO NOT MIDITE IN THIS	CDACE		
					DO NOT WRITE IN THIS	SPACE	
					3. Date Incorporated or Qualifed 10/22/1998		
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0876686		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		5 Additional e Required
City & State		City & State			6. Election Campaign Financing	\$5	00 May Be
— ·	•	28			Trust Fund Contribution		ded to Fees
23	Country		Country		8. This corporation owes the current year In		
Zip	· — ·				Personal Property Tax.	_] Yes	Xino
24	25				10. Name and Address of New Registered		
	9. Name and Address of Current	Registered Agent	81	Name	10. Hallie Blie Addition of the Hogister		
BRAFMAN, HOWARD J				82 Street Address (P.O. Box Number is Not Acceptable)			
	MIAMI LAKES DRIVE WEST						
MAIM	AI LAKES FL 33016-5897		83				ļ
			84	City	F1	85	Zip Code
	<u> </u>		لبلب			<u> </u>	a its registered
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligatio	r Florida. Such change was autho	nzea by	tne corpo	corporation submits this statement for the purpose o oration's board of directors. I hereby accept the appo	intment a	y its registered is registered
SIGNATURE							
SIGNATORE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Regi	istered Agen	t signature n	equired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A		
TITLE	D DELETE 1.11		1.1 TITLE		DP TAY T	∰Cha	inge
NAME	KISLAK, JAY				KISLAK, JAY I.	,	i
STREET ADDRESS	EET ADDRESS 7900 MIAMI LAKES DRIVE WEST 1.35			ADDRESS	7900 MIAMI LAKES DRIVE WEST		
CITY-ST-ZIP	MIAMI LAKES FL 33016-5897		1.4 CITY-\$1	r-ZIP	MIAMI LAKES, FL 33016-5897		•
TITLE	D DELETE 2.1		2.1 TITLE		DVPS	∑ Cha	nge
NAME	BRAFMAN, HOWARD J		2.2 NAME		BRAFMAN, HOWARD J.		
STREET ADDRESS	TOO MAAN LAVED DOWE WEST			ADDRESS	7900 MIAMI LAKES DRIVE WES	Г	ì
			2.4 CITY-S		-MIAMI LAKES, FL 33016-5897		
CITY ST-ZIP			3.1 TITLE	1~4JF -	VPT	☐ Cha	nge X Addition
TITLE	_		3.2 NAME		BARTELMO, THOMAS		
NAME				**************************************	7900 MIAMI LAKES DRIVE WES	т	Ì
STREET ADDRESS	•		3.3 STREET		MIAMI LAKES, FL 33016-5897	-	ļ
CITY-ST-ZIP		□ DELET E	3.4. CITY-S 4.1 TITLE	1-21	HIMI BRIDD, LE 00040 5057	Cha	ange Addition
NAME	·	_ 5	4.2 NAME				-
			4.3 STREET	ADDESS			٠ ا
STREET ADDRESS			4.4 CITY-S				
CITY-ST-ZIP	<u> </u>	□ DELETE	5.1 TTLE	1 - Z.II		☐ Cha	inge Addition
			5.2 NAME			_	
NAME	, '		5.3 STREET	ADDPESS			
STREET ADDRESS			5.4 CITY-S				j
CITY-ST-ZIP		DELETE	6.1 TITLE	1+ZIF		☐ Cha	ange Addition
ππε		← DETELE	62 NAME			L) Oild	a~ □ \(\text{Localization}\)
1141 de	i e e e e e e e e e e e e e e e e e e e		D.Z NAME				

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

STREET ADORESS

April/4 , 1999

(305) 364-4213

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90092 021 ***150.00