File Now. Filing Fee after May 1 is $225.00

CORPORATION
ANNUAL REPORT
1994-95

S39863

FILED
95 APR 11 AM 9:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name and Mailing Address of Corporation: DOCUMENT # S39363 (4)

JAKKIE REALTY CORP.
1865 BRICKELL AVE STE 209
MIAMI FL 33129-1621

93

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2

DO NOT WRITE IN THIS SPACE

FILING FEE $200.00	ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

3. Date Incorporated or Qualified: 03/18/1991
3a. Date of Last Report: 06/12/1992
4. FEI Number: 650257246 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $138.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S 199.032 Florida Statutes ☒ Yes ☐ No

2. Mailing Address	2a. Principle Place of Business
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip / Country	Zip / Country
24 / 25	29 / 30

9. Name and Address of Current Registered Agent

EVANS, SHELDON P.A.
1865 BRICKELL AVENUE
BUILDING A, SUITE 209
MIAMI FL 33129

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 | 86 Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 617.0502 and 617.1508, 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 J. Sheldon Evans P.A (Registered Agent Accepting Appointment) DATE 12/22/94

12. OFFICERS AND DIRECTORS		13. OFFICERS AND DIRECTORS CHANGES	
1.1 TITLE	D	1.1 TITLE	
1.2 NAME	AMKIE, JACK	1.2 NAME	
1.3 ADDRESS	520 BRICKELL KEY DRIVE	1.3 ADDRESS	1865 Brickell Ave., Suite A-209
1.4 CITY-ST-ZIP	MIAMI FL	1.4 CITY-ST-ZIP	Miami, FL 33129
2.1 TITLE		2.1 TITLE	
2.2 NAME		2.2 NAME	200001456572
2.3 ADDRESS		2.3 ADDRESS	-04/14/95--01044--001
2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP	****425.00 ****425.00
3.1 TITLE		3.1 TITLE	200001456572
3.2 NAME		3.2 NAME	-04/14/95--01044--002
3.3 ADDRESS		3.3 ADDRESS	****150.00 ****150.00
3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP	200001456572
4.1 TITLE		4.1 TITLE	-04/14/95--01044--003
4.2 NAME		4.2 NAME	****200.00 ****200.00
4.3 ADDRESS		4.3 ADDRESS	
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP	
5.1 TITLE		5.1 TITLE	
5.2 NAME		5.2 NAME	
5.3 ADDRESS		5.3 ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE		6.1 TITLE	
6.2 NAME		6.2 NAME	
6.3 ADDRESS		6.3 ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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; I further certify 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 or Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 above, or on an attachment with an address.

SIGNATURE By Sheldon Evans Attorney in fact DATE 4/26/95

Print/Type Name of Signing Officer or Director	Title(s)	Daytime Telephone Number
Jack Amkie	Director	(305) 854-8541