FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 8:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **S76041** **(0)**

1. Corporate Name

CAPITAL FORECLOSED PROPERTY, INC.

Principal Place of Business	Mailing Address
1221 BRICKELL AVE MIAMI FL 33131	1221 BRICKELL AVE MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated / Qualified: **08/27/1991**

3a. Date of Last Report: **06/21/1994**

2. Principal Place of Business — 21 | 2a. Mailing Address — 26

4. FEI Number: **65-0286395** ☐ Applied For ☐ Not Applicable

22 Suite/Apt. # etc. | 27 Suite/Apt. # etc.

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

23 City & State | 28 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

24 Zip | 25 County | 29 Zip | 30 County

8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

MEYERSON, LAURENCE
1221 BRICKELL AVE
MIAMI FL 33131

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

11. Pursuant to the provisions of Sections 607.0502 and 607.1008, 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

12. OFFICER AND/OR DIRECTOR		13. ADDITIONAL CHANGES TO OFFICERS AND/OR DIRECTORS	
Title	PD	Title	☐ Change ☐ Addition
Name	PAUL, MICHAEL	Name	
Address	1221 BRICKELL AVE	Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title	D	Title	☐ Change ☐ Addition
Name	HARRIS, LUCIOUS	Name	
Address	1221 BRICKELL AVE	Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title	D	Title	☐ Change ☐ Addition
Name	PROMOFF, DAVID	Name	
Address	1221 BRICKELL AVE	Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title	S	Title	☐ Change ☐ Addition
Name	SAXON, BARBARA S.	Name	DELETE
Address	2000 TOWERSIDE TERRACE #509	Address	
City-St-Zip	MIAMI FL	City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	
Title		Title	☐ Change ☐ Addition
Name		Name	
Address		Address	
City-St-Zip		City-St-Zip	

14. I hereby certify that the information supplied with this filing is accurate and 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 12 or Block 13 with an address, with an asterisk, or on an attachment with an address.

SIGNATURE: Michael Paul 4/27/95 305-536-1601

SIGNATURE AND TYPED OR PRINTED NAME OF FLORIDA OFFICER OR DIRECTOR — Date — Daytime Phone #

0127094 CP