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

**PROFIT** CORPORATION ANNUAL REPORT

CHTY-ST-ZIP

appears in Block 12 or



ELORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # \$77470** 

(0)

EAST WEST REALTY ADVISORS INCORPORATED

Principal Place of Business Mailing Address 1000 S. FEDERAL HWY. 1000 S. FEDERAL HWY. **SITE 202** SITE 202 FORT LAUDERDALE, FL 33316-1267 FORT LAUDERDALE, FL 33316 3. Date Incorporated or Qualified 3a. Date of Last Report 09/04/1991 02/20/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 65-0284587 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Country Zip Ζıp This corporation has liability for intangible tax under s. 199.032, Yes M No Florida Statutes 25 30 24 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GOLDSTEIN MARK B. 1000 SOUTH FEDERAL HIGHWAY 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 202 83 FORT LAUDERDALE FL 33316 ₿4 City 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Stip at we typodior pented name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12 13. PSD DELETE Change Addition 1.1 TITLE 1916 MILSTEIN, ROBERT G. 1.2 NAME MAAAF 1000 S. FEDERAL HWY., SUITE 202 1.3 STREET ADDRESS STREET ADORESS FORT LAUDERDALE FL 1.4 CITY-ST-ZIP CHEY-ST ZIE DELETE Change Addition 21 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CHY-SI-7P DELETE 3.1 TITLE Change Addition  $T I^\intercal L E$ 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP OTY+ST-ZIP DELETE Addition ☐ Change TITLE 4.1 TITLE NAME 4.2 NAME STREET ADORESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP DELETE Addition Change THTLE 51 TITLE NAMO 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZiP CITY - ST - ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY - ST- ZIP

I do hereby certily 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 Statules; and that my name

802/87-2202

(96/6) (96/6)

FILED

Apr 01 1997 8:00am

Secretary of State