FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUN 1. Corporation	MENT # V5366	65 (8)			
F&LI	Properties, Inc.				
Principal Place	of Business	Mailing Address		I FORFI DIXENI OFFE NAIN ONLIN CHIOF	AUST OLGIN DSGAL OLDUK ESDIL OLDUK ESDIL INDI
7481 NW 41ST COURT LAUDERHILL FL 33319		7481 NW 41ST COURT LAUDERHILL FL 33319			
				 Date Incorporated or Qualified 07/28/1992 	3a. Date of Last Report 04/24/1995
2. Principal Pla	nce of Business	28. Mailing Address		4. FEI Number 65-0347465	Applied For Not Applicable
Suite, Apt. #	#. etc	Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Gertificate of Status Desired	Fee Required
City & State		Orty & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 Zip	Country	28	Country	This corporation has liability for in	Added to Fees ntangible tax under s 199.032,
24	25	29	30	Florida Statutes XYes	~
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New R	egistered Agent
EH #100	NIO.		81 Name		
FILINGS INC. 3732 NW 16TH STREET			82 Street Add	ress (P.O. Box Number is Not Acceptabl	e)
	DERDALE FL 33311		83	ermen i en l'improvemente verta de l'artis endant del plant e la balleme l'échien (de della establica de l'abb	
			84 City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
11 Pursuant to	o the provisions of Sections 607.05	02 and 607 1508 Flouris Statut	us the above paying correct	ration submits this statement for the pur	ryses of changing its registered office.
or registere	ed agent, or both, in the State of Flood h, and accept the obligations of, Se	orida. Such change was authoriz	ed by the corporation's boa	rd of directors. I hereby accept the appo	intment as régistered agent. Lam
	Signature, typed or printed nan elot registered ag	entaut the trapping in the MND DIRECTORS	HE Registered Agent signal are require		OF DRIAND CHOCOLOGO BLIAG
12.	Ornorns A	DELETE	13. 1 1 Titue	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	LEVINSON, JUDITH		1.2 NAME		
STREET ADDRESS	7481 NW 41ST CT		1.3 STREET ADDRESS		
CITY - \$T - ZIP	LAUDERHILL FL		1.4 CITY - ST - ZIP		
TITLE	D	☐ DELETE	2 1 TillE		Change Addition
NAME	FEISS, JOEL		2.2 NAME		
STREET ADDRESS	7481 NW 41ST CT		2 3 STREET ADDRESS		
CITY-ST-ZIP	LAUDERHILL FL		2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY ST ZIP		☐ DELETE	3.4 CHY-S1-2IP 4.1 T(TLF		Change Addition
NAME		L_J titlett	4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		2, , 2
STREET ADDRESS			5 3 STREET ADORESS		
CITY-ST-ZIP			5.4 CHY-SI-2IP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME	•		6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CHTY-ST-ZIP		د بيد بد بد بعد د از اداريد بين الماريد و الماريد الماريد الماريد الماريد الماريد الماريد الماريد الماريد الم	6.4 CITY - ST - ZIP		
1.4 Ldo hereb	v ceruty that the internation supplie	a warn this binnerie was interily from	nepart and door not dualify t	ior the exemption stated in Section 110 l	37/37k) Florida Statutoc I further

I do nereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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.

SIGNATURE:

ED OLERINTED IXME OF SIGNING OFFICER OR DIRECTOR