

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

**CORPORATION
ANNUAL REPORT
1995**



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
Tallahassee, Florida 32399-0001

**APPROVED
AND
FILED**

95 MAY -1 PM 2:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # V61002

(4)

1. Corporation Name

MEDALIAN REALTY GROUP INC

Principal Place of Business

12794 WEST FOREST HILL BLVD.
SUITE 29
W. PALM BEACH FL 33414

Managing Agents

12794 WEST FOREST HILL BLVD
SUITE 29
W. PALM BEACH FL 33414

DO NOT WRITE IN THIS SPACE

3. Date of Report	3a. Date of Last Report
09/01/1992	05/01/1994
4. File Number	Applied For
65-0347772	Not Applicable
5. Certificate of Status Desired	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.041, Florida Statutes ☐ Yes ☐ No	

2. Principal Place of Business

21. State of Incorporation *Same*

2a. Managing Agents

26. State of Incorporation *Same*

22. City, State

27. City, State

23. City, State

28. City, State

24. City, State

25. City, State

29. City, State

30. City, State

9. Name and Address of Current Registered Agent

MEDALIAN, JALIL
12794 W. FOREST HILL BLVD.
SUITE 29
W. PALM BEACH FL 33414

10. Name and Address of New Registered Agent

81. Name	<i>Same</i>
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL
85. Zip Code	

11. Pursuant to the provisions of Sections 607.011, 607.012, and 607.013, Florida Statutes, this above named corporation submits this statement for the purpose of changing its registered office or registered agent as both in the State of Florida. If a 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 duties imposed by the Florida Statutes.

SIGNATURE

Jalil Medalian

4/25/95

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 1995	
NAME	PVS MEDALIAN, JALIL	NAME	☐ Change ☐ Addition
STREET ADDRESS	1768 HOLLYHOCK ROAD	STREET ADDRESS	
CITY, STATE	W. PALM BEACH FL	CITY, STATE	
NAME	T MEDALIAN, JALIL	NAME	☐ Change ☐ Addition
STREET ADDRESS	1768 HOLLYHOCK ROAD	STREET ADDRESS	
CITY, STATE	W. PALM BEACH FL	CITY, STATE	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, STATE		CITY, STATE	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, STATE		CITY, STATE	
NAME		NAME	☐ Change ☐ Addition
STREET ADDRESS		STREET ADDRESS	
CITY, STATE		CITY, STATE	

14. I, the undersigned, certify that the information supplied with this filing is complete, correct and true and qualify for the exemption stated in law for 1995/1996 Florida Statutes. I further certify that the information is filed in the proper filing office and that the corporation is in good standing and that the corporation shall have the same legal effect as if made under oath. That I am an officer or director of the corporation or the person authorized to make this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 of this filing. A false statement is punishable under 607.013, Florida Statutes.

SIGNATURE:

Jalil Medalian

JALIL MEDALIAN

4/25/95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR