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

SIGNATURE:

Mar 16 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # V69230 (3)BRIGHTON REALTY INVESTMENT, INC. Principal Place of Business Mailing Address 8370 W FLAGLER STREET 8370 W FLAGLER STREET SUITE 250 SUITE 250 DO NOT WRITE IN THIS SPACE MIAMI FL 33144 MIAMI FL 33144 3. Date Incorporated or Qualified 10/02/1992 2. Principal Place of Business 2a. Mailing Address 4, FEI Number Applied For 65-0543259 Not Applicable 21 Suite, Apt. #. etc. Suite, Apt #, otc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ No 24 29 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name NG. JULIE 8370 W FLAGLER STREET Street Address (P.O. Box Number is Not Acceptable) 82 SUITE 250 63 **MIAMI FL 33144** 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0002 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 lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Fingistored Agent signature required when reinstating) Signature, typod or protect hanse of registered agent and time if applicable DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DE LE 1E Change Addition 1.1 TITLE THLE NG, JULIE NAME 1.2 NAME 8370 W FLAGLER STREET, STE. 250 1.3 STREET ADDRESS STREET ADORESS **MIAMI FL 33155** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELFTE Addition Change THILE 21 TITLE NG. WALTER NAME 2.2 NAME 10101 COLLINS AVENUE APT 8E STREET ADDRESS 2.3 STREET ADDRESS BALHARBOUR FL 33156 CITY-SI-ZIF 2 4 CITY-ST-ZIP DELETE Change Addition THTLE 3 1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY- ST- ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 51 TIFLE NAME 5.2 NAME STREW ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CI1Y - \$1 - ZIP Change Addition DELETE 61 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 64 CITY-ST-ZIP 14. Thereby certify 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 4 or Block 13 if chapter 4 or Block 13 if chapter 5 or Block 14 or Block 15 or Block 15 or Block 15 or Block 15 or Block 16 or Block 16 or Block 17 or Block 17 or Block 18 or Block 19 or

FILED

03-06-98