## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00 FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Morthoni ANNUAL REPORT Secretary of State 16-3-11000 DECEMPORATIONS 1996 4/16-91 L11088 DOCUMENT # MRK REALTY, INC. Principal Place of Business Mailing Address 551 NW 77TH STREET 551 NW 77TH STREET SUITE 100 SUITE 100 **BOCA RATON FL 33487 BOCA RATON FL 33487** 3. Date Incorporated or Qualified 3a. Date of Last Report 08/21/1989 03/17/1995 2. Principal Place of Business 2a. Mailing Address Applied For 26 65-0144514 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip 8. This corporation has liability for intangible tax under s. 199.032, Country Zιo Country 24 Yes X No 25 30 Florida Statutes 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BRUDERMAN, ROBERT W. 82 Street Address (P.O. Box Number is Not Acceptable) 551 NW 77TH STREET 83 SUITE 100 **BOCA RATON FL 33487** 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above harried corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Statutes was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or printed native of registered agent as if the diagram at it (12/95) OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1 1 bite Change Addition NAME BRUDERMAN, ROBERT W. 1.2 NAME CR2E034 STREET ADDRESS 551 NW 77TH STREET, SUITE 100 13 STREET ADDRESS CITY - ST-ZIP **BOCA RATON FL** 14 Cil r - SI - Z-P TITLE DELETE 2.13tftE Change ☐ Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 017 Y - ST - 21P 2.4 CHY - \$1 - ZIP DELETE TITLE [ ] Change 3 1 THEF ☐ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4 Cily - SI - 2iF C DELETE TITLE 4.1 TILE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 44 CITY ST ZIP TITLE DELETE Change 5 1 THLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREE! ACCRESS CITY - ST - ZIP 54 CITY ST ZIP DELETE TITLE 6.1 III.E ☐ Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-S1-ZIP 6.4 CITY - ST - 7.P 14. I do hereby certify that the information supplied with this fling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(6). Florida Statutes I further certify that the information indicated on this argust 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 off that of the foreign or the eceiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Blogs of the group of the properties of the prop

SIGNATURE:

AND CHANGE HAME OF SIGNING OFFICER OR DIRECTOR

3/24/86

407-241-7441