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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 161325

1. Corporation Name

FILED
Mar 06, 1999 8:00 am
Secretary of State
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STAHL'S	S REALTY CORPORATION							
Principal Plac	e of Business	Mailing Address			T ADDINE TIONS ENGLANDED INTO	8: 81:1 BIBII 8:1	165 DIEST DI	SII BIBII A(SII INBI
1360 S.W. 8 S	Т	600 NE 25 AVENUE						
MIAMI FL 33135 HALLANDALE FL 33009					NOT WOTE IN THE COACE			
US US					DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed 04/26/1950			
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number		$\vdash$	Applied For
21		26			59-6071684		<u> </u>	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		•	5 Additional Required
22		City & State						00 May Be
City & Stat	e	<u> </u>			6. Election Campaign Financing Trust Fund Contribution			ed to Fees
23 Zip	Country		Coun	trv	8. This corporation owes the curre	ent vear inta		00.12.1.220
24	25	F -	30		Personal Property Tax.		Yes	□No
24	9. Name and Address of Curren				10. Name and Address of New R	egistered A	gent	
				81 Name				
STA	HL, DAVID		ļ.,	DD Chron Ad	desa /D.O. Boy Number in Not Assests	hle)		
600	N.E. 25 AVE.		{	B2 Street Add	dress (P.O. Box Number is Not Accepta	uie)	-	
HAL	LANDALE FL 33009		į.	83				
			L				70-1-	7: 0:1:
			l'	B4 City		FL	85 Z	Zip Code
l office or r	egistered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was au tions of, Section 607.0505, Flori	thonzed da Statu	by the corpora les.	rporation submits this statement for the tion's board of directors. I hereby accep	t the appoin	tment as	s registered
	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: I	<u> </u>	gent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFF		DIREC	TOPS IN 12
12.	PDT	DELETE	13.	F	ADDITIONS/CHANGES 10 CIT	ICENS AND	Chan	
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14. I hereby 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 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 change from an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR