

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

FILED
Jul 17 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998

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

DOCUMENT # 649186 (4)
 1. Corporation Name
BETTER LAND INVESTMENT AND REALTY CORP.

Principal Place of Business Mailing Address
**100 FRONDORSON CIRCLE
 APOLLO BEACH
 FL 33572 suite 202**

2. Principal Place of Business 21 **100 Frondorson Cir**
 Suite, Apt. #, etc. 22 **202**
 City & State 23 **Apollo Beach, FL**
 Zip 24 **33572** Country 25
 26. Mailing Address 26 **SAME**
 Suite, Apt. #, etc. 27
 City & State 28
 Zip 29 Country 30

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **12/21/1979**

4. FEI Number **59-1958399** Applied for 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 owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

B1 Name **FOUAD ANIS**
 B2 Street Address (P.O. Box Number is Not Acceptable) **2841 N. Ocean Blvd.**
 B3 **PO4**
 B4 City **FT Lauderdale FL** B5 Zip Code **33308**

11. Pursuant to the provisions of Sections 607.0502 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 familiar with, and accept, the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* DATE **7/6/98**

12. OFFICERS AND DIRECTORS

TITLE	PDS	<input type="checkbox"/> DELETE
NAME	ANIS, FOUAD	
STREET ADDRESS	2841 N. Ocean Blvd #1904	
CITY - ST - ZIP	FT. Lauderdale FL	<input type="checkbox"/> DELETE
TITLE		
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY - ST - ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

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*****150.00**

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 supplementary 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 executor or trustee or 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 newly added, with an address.

SIGNATURE: *[Signature: Fouad Anis]* DATE: **6/18/98** **9595667109**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/97)