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Mar 09, 1999 8:00 am
Secretary of State

03-09-1999 90015 033 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000001535

1. Corporation Name

FIFTEEN SOUTHEAST REALTY, INC.

Principal Place of Business

3100 N 29TH COURT
FIRST FL
HOLLYWOOD FL 33020
US

Mailing Address

3100 N 29TH COURT
FIRST FL
HOLLYWOOD FL 33020
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/26/1996

4. FEI Number

13-3856392

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 **763 COLLINS AVE**

Suite, Apt. #, etc.

22 **SUITE 304**

City & State

23 **MIAMI BEACH, FL**

Zip

24 **33139**

Country

25 **USA**

2a. Mailing Address

26 **763 COLLINS AVE**

Suite, Apt. #, etc.

27 **SUITE 304**

City & State

28 **MIAMI BEACH, FL**

Zip

29 **33139**

Country

30 **USA**

9. Name and Address of Current Registered Agent

SANDERS, IAN
3100 N 29TH COURT
FIRST FL
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 **763 COLLINS AVE**

SUITE 304

84 City

MIAMI BEACH FL

85 Zip Code

33139

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 *Jan Sanders*
Signature, typed or printed name of registered agent and title if applicable.

IAN SANDERS
(NOTE: Registered Agent signature required when reinstating)

2/26/99
DATE

12. OFFICERS AND DIRECTORS

TITLE **PTD** ☐ DELETE

NAME **SANDERS, MARK**
STREET ADDRESS **3100 N 29TH COURT, FIRST FL**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE **VSD** ☐ DELETE

NAME **SANDERS, IAN**
STREET ADDRESS **3100 N 29TH COURT, FIRST FL**
CITY-ST-ZIP **HOLLYWOOD FL 33020**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS **763 COLLINS AVE., SUITE 304**
1.4 CITY-ST-ZIP **MIAMI BEACH, FL 33139**

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS **763 COLLINS AVE., SUITE 304**
2.4 CITY-ST-ZIP **MIAMI BEACH, FL 33139**

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

IAN SANDERS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/99
Date

305-632-9553
Daytime Phone #

CR2E034 (1/98)