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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # F97000006156 (0)

TATE TERRACE REALTY INVESTORS, INC.

Principal Place of Business 448 VIKING DR., #220 VIRGINIA BEACH VA 23452

Mailing Address

448 VIKING DR., #220 VIRGINIA BEACH VA 23452

## **FILED** Feb 03 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified

						11/20/1997			
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Applied For		
21		26				54-1540695	No.	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, e			•			5. Certificate of Status Desired		Additional	
22		27				5. Co. L. 1000 51 C. 1000 500 1100	Fee Re	equired	
City & State	9	City & State	¬ '			6. Election Campaign Financing		May Be	
23	[28]			Country		Trust Fund Contribution		to Fees	
Zip	Country	Zip	$\vdash$	Intry		8. This corporation owes or has paid the curre			
24 25 29 30 30 9. Name and Address of Current Registered Agent				Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent					
					Name				
CORPORATION SERVICE COMPANY				31 Name					
1201 HAYS STREET				82 Street Address (P.O. Box Number is Not Acceptable)					
TALLAHASSEE FL 32301-2525				83					
				53					
			İ	84	City	<b>-</b> 1	<b>85 Z</b> ip	Code	
				1	<u>:</u>	<u>FL</u>			
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, typed or printed name of registered agent			i Agei	nt signature rec	quired when rainstating) DATE	VDEOTOE	· · · · · · · · · · · · · · · · · · ·	
12.	OFFICERS AND DIRECTORS 13. PD DELETE 1.11			*1.5		ADDITIONS/CHANGES TO OFFICERS AND D	Change	Addition	
	• •			-		L	1 Change	Audition	
NAME	<u>-</u>	A ZOTIL OT		WE				13	
STREET ADDRESS	MOONIA PEROLITI AGASA				ADDRESS			ļį	
CITY-ST-ZIP	VIRGINIA BEACH VA 23451	——————————————————————————————————————			T- ZIP		1.05	- Addition	
TITLE	V DELETE 2.1					_	_f Change	Addition C	
NAME				2.2 NAME					
STREET ADDRESS	448 VIKING DR., #220		2.3 ST	2.3 STREET ADDRESS					
CITY-ST-ZIP	VIRGINIA BEACH VA 23452			2. 4 CITY-ST-ZIP		-	T	- <u>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          -</u>	
TITLE	SD DELETE			3.1 TITLE		L	Change	Addition	
NAME	SANDLER, ARTHUR B		3.2 NA	3.2 NAME					
STREET ADDRESS	536 REDGATE AVE.		3 3 ST	3 3 STREET ADDRESS				ľ	
CITY - ST - ZIP				3.4. CITY - SY - ZIP					
TITLE	DÉLETE		4.1 TiT	4.1 TITLE		Ł	_ Change	Addition	
NAME			4. 2 N/	AME.					
STREET ADDRESS			4.3 STI	REET /	ADDRESS				
CITY-ST-ZIP			4,4 CIT	Y-ST	r- ŻIP				
TITLE		☐ DELETE	5 1 TIT	LE			Change	Addition	
NAME			5.2 NA	MĘ					
Street address			5.3 ST	REET A	ADDRESS				
CITY-ST-ZIP			5.4 C/I	Y-ST	- ZIP				
TITLE		DELETE	6.1 T/T	LE			Change	☐ Addition	
NAME			6.2 NA	ME					
STREET ADDRESS			6.3 STI	REET A	ADDRESS				
CITY-ST-ZIP			6.4 CIT					1	
14. I hereby c	erilly that the information supplied with	this filing does not qualify for	or the exe	moti	ion stated i	in Section 119.07(3)(i), Florida Statutes. I further certifutes shall have the same legal effect as if made under	y 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 appear with an address.

-REQUIRED