

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

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PROFIT CORPORATION ANNUAL REPORT 1999

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



FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 99 JUL 26 PM 1:27

DOCUMENT # **K02818**
 1. Corporation Name
NORTH AMERICAN REALTY ACQUISITIONS, INC.



Principal Place of Business
 241 PGA BLVD.
 PALM BEACH GARDENS FL 33410

Mailing Address
 2401 PGA BLVD.
 280
 PALM BEACH GARDENS FL 33410
 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
11/17/1987

4. FEI Number
98-0124643

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
 Suite, Apt. #, etc.
 City & State
 Zip Country

2a. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country

9. Name and Address of Current Registered Agent
**WIENER, DAVID J., ESQUIRE
 LEVY, KNEEN, BOYES, WIENER, ET AL
 1400 CENTREPARK BLVD., SUITE 1000
 WEST PALM BEACH FL 33401**

10. Name and Address of New Registered Agent

81 Name
David J. Wiener

82 Street Address (P.O. Box Number is Not Acceptable)
2401 PGA Boulevard

83
Suite 280

84 City
Palm Beach Gardens

85 Zip Code
FL 33410

I, the undersigned, being a resident of the State of Florida, do hereby certify that the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, as provided 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: **2-9-99**

OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
STREET ADDRESS TY-ST-ZIP	PD PRESTON, JOHN W.S. 2401 PGA BLVD. PALM BEACH GARDENS FL 33410 <input type="checkbox"/> DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700002942417-- -07/27/99--01027--017 ***150.00 ***150.00
STREET ADDRESS TY-ST-ZIP	VTD COHEN, PETER 2851 JOHN ST #1 MARKHAM, ONTARIO CAN <input type="checkbox"/> DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition D
STREET ADDRESS TY-ST-ZIP	VSD GREEN, ROBERT S. 2851 JOHN ST #1 MARKHAM, ONTARIO CAN <input type="checkbox"/> DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition VPST
STREET ADDRESS TY-ST-ZIP	<input type="checkbox"/> DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition DVPAS BERNICK, LARRY 2401 PGA BOULEVARD, SUITE 280 PALM BEACH GARDENS, FL 33410
STREET ADDRESS TY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <i>[Signature]</i>
STREET ADDRESS TY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: *[Signature]* DATE: **2-9-99** 561-624-9500