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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P17798

CONTINENTAL GEORGIA REALTY CORPORATION

FILED									
Apr 27 1998 8:00am									
Secretary of State									

Principal Place	a of Puninger	Mailing Address	Address				I (I DIJII DIBI	/ 830 1/ 8 18/1 0 /	
			Mailing Address C/O CONTINENTAL REALTY CORPORATION						
	INTAL REALTY CORPORATION								
2255 GLADES RD., STE. 223A BOCA RATON FL 33431		BOCA RATON FL 3343	2255 GLADES RD., STE, 223A			DO NOT WRITE IN THIS SPACE			
	12 50101	OUGH THI DIE TO SE	BOOK HATON IL 30431			3. Date Incorporated or Qualified			
						01/27/1988			İ
2. Principal P	ace of Business	2a. Mailing Address	Address			4. FEI Number			Applied For
21		26	26			65-0455466			Not Applicable
Suite, Apt.	#, e lc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		27	27			5. Certificate of Status Desired		Fee	Required
City & State	•	City & State				6. Election Campaign Financing		\$5.0	O May Be
23		28				Trust Fund Contribution	_ <u> </u>	Adde	d to Fees
Zip	Country	Zip	├ ──¬	untry		8. This corporation owes or has p		_ `	⊢ /-
24	25	29	30			Personal Property Tax due Jur		Yes	No No
	g, Name and Address of Curre			247		10. Name and Address of New F	egistered	Agent	
	TED CORPORATE SERVICES, I	NC.		81	Name				
	TH STREET, STE. 300		İ	82	Street Addr	ress (P.O. Box Number is Not Accepte	ble)		
NO	RTH MIAMI BEACH FL 33162		'						
				83					
				84	City			85 Zi	p Code
			i		Oily		FL	. 55 2.7	
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Sta	tutes, the a	bove-r	named corp	poration submits this statement for the tion's board of directors. I hereby acc	purpose o	of changing	g its registered
agent. La	m familiar with, and accept the oblig	pations of, Section 607.0505,	Florida Stat	tutes.	ne corporat	norts board of directors. Thereby acc	api me api	JOHN HOR E	as registered
SIGNATURE									
0101111011=	Signature, typed or printed name of registered ag	· · · · · · · · · · · · · · · · · · ·	VOIF: Registere	d Agent	signature requir	red when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICERS AN		
TITLE	PD	☐ DELETE	1.1 TI					Change	e L. Addition
NAME	ORGANEK, EMANUEL		12 N	AME					I
STREET ADDRESS	579 8 NW 33RD AVE.		1.3 \$1	TAEET AD	DDRESS				Į.
CITY-ST-ZIP			1.4 C	ŧTY-ST-	ZiP				
TITLE	VST	☐ DELETE	2.1 Ti	ITLE				L Change	e L_1 Addition
NAME	ORGANEK, BARBARA		2.2 N	AME					
STREET ADDRESS	5798 NW 33RD AVE.		2.3 S1	TREET AD	OORESS				
CITY+ST-ZIP	BOCA RATON FL		2.4C	ITY-ST-	ZIP				
TITLE		☐ DELETE	3.1 10	ΤL€				Change	Addition
NAME			3.2 N/	AME					ŀ
STREET ADDRESS			3.3 S1	TREET AD	DORESS				
CITY-ST-ZIP			3.4. C	HTY-ST-	ZIP				
TITLE		DELETE	4.1 11	TLE				☐ Change	Addition
NAME			4.2 N	IAME	1				,
STREET ADDRESS			4.3 ST	TAEET AD	DRESS				
CITY-ST-ZIP			4.4 CI	ITY-ST-7	ZIP				
TITLE	-	☐ DELETE	5.1 Tri	TLE	1 -			Change	Addition
NAME			5.2 N/	AME					
STREET ADDRESS			5.3 \$1	TREET AD	DORESS				
CITY-ST-ZIP			5.4 CI	ITY-ST-Z	ZIP				
TITLE		☐ DELETE	6.1 TI	TLE				Change	Addition
NAME			6.2 NA	AME	Ì				İ
STREET ADDRESS			6.3 ST	TREET AD	DRESS				
CITY-ST-ZIP			6.4 Ci	ITY-ST-2	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 of 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 bit an address.