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 #

101

1. Corporation Name SELECT REAL ESTATE OF PI	\ <i>\</i>				
Principal Place of Business	Mailing Address		1 -021(416 104 010)(00)(0 71410 01)(1 (00) 010)(01)	Ermis #4611 Asbit Albit 1881	
2800 POURTH ST. NORTH AS ST. PETERSBURG FL 34641 US	2480 E BAY OR 5536 CENTRAL AVE. LARGO FL 24641 US	5536 CENTRAL AVE. LARGO FL 34641		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/31/1990	
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For	
	Step & DUSD Eas	Hay Dr	65-0238368	Not Applicable	
Suite, Apt #, etc.	Suite, Apl. # elc 27 A - S		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 (Arg) D.	Cay & State 28 A 2 7 C D		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
zip Columby 20 24 FC 25 537	29 3377/ 3	Pirellas	 This corporation owes or has paid the c Personal Property Tax due June 30. 	Yes No	
			10. Name and Address of New Registered Agent		
CARMADELLA, JAMES 5536 CENTRAL AVE. PALM HARBOR FL 34683 63 14 64 City		62 Street Add	Tames Carmadelk Address (P.O. Box Number is Not Acceptable) 2 Columbia Ave		
11. Pursuant to the previsions of Sections 607 05:02 and 607 15:08. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. Or high in the State of bands such or submits a submit state of bands of the corporation's board of directors. I hereby accept the appointment as registered agent I am familiar with, and accept the objections of Society 607 05:05. Florida Statutes. SIGNATURE					
SIGNATURE Signature, tyrint or I cled can in of the	Pered agent med talled diagraphical Rep. (NOTE F	lugistered Agent signature requi		<u> </u>	
	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12	
TITLE D	DELETE	1.1 TITLE		Change Addition	
NAME CARMADELLA, JAMES		1 2 NAME		ļ	
STREET ADDRESS 1412 COLUMBIA AVE		13 STREET ADDRESS			
CITY-ST-ZIP PALM HARBOR FL		1.4 CITY-ST-ZIP			
TITLE	☐ DETELE	2.1 TITLE		Change Addition	

STREET ADDRESS 2 3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST - ZIP DELETE 3 1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 3 3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELFTE Change Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5 3 STREET ADDRESS CITY-ST-ZIP 5 4 CHTY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP

14. Thereby 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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 our phattachment with an address.

SIGNATURE:

COMPANY OF STREET

FILED

May 07 1998 8:00am

Secretary of State

813.538-9877