FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90112 040 \*\*\*150.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # **S81549**

1. Corpora ion Name

BALISTRERI REALTY, INC.

Principal Place of Business Mailing Address															
1350 North Federal Highway Pompano BCH FL 33062 US			1350 NORTH FEDERAL HIGHWAY POMPANO BCH FL 33062 US												
								DO NOT WRITE IN THIS SPACE							
03		•							te ir corporate /20/1991	d or Qualife	ed			•	
2. Principal Place of Business			2a. Mailing Address				4. FEI Number				App is	ed For			
21			26				65-0284108				Not A	pplicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired			\$8.75					
22		27						<b>3</b> . 33.					Requi		
City & S ate			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					•			
23		28							st Fund Contr				d to F	ees	
Zip	Country	<u> </u>	Zip ⊐		untry			i	s corporation		urrent year l	ntangible ☐ Yes	52	HVO	
24	25	29		30	_	_			rsonal Propert me and Addr		w Registere				
	9. Name and Add es	is of Current Rec	Jistered Agent		81	N	ame -	10. 144	ille and Addi	633 01 110	w registere	a Age	—-		
SULI	LIVAN, WILLIAM F.														
	EAST ATLANTIC BOL	ULEVARD			82	S	treet Addre	ess (P.O.	Box Number i	s Not Acce	eptable)				
	E 410				83	$\vdash$								<del></del>	
	PANO BEACH FL 330	162													
					84	С	ity				F	85   Zi	ip Coc	Jode	
SIGNATURE	m familiar with, and acce						nature required				DATE				
12.		FICERS ANE DI		13				ADD	NTIONS/CHA	NGES TO	OFFICERS /	ND DIREC		S IN 12 Addition	
TITLE	DP		☐ DELETE		TITLE							Поняц	je.		
NAME			1.33		1.2 NAME										
STREET ADDRE 3S					1.3 STREET ADDRESS										
CITY-ST-ZIP	POMPANO BEACH FL		∩ nelete			1.4 CITY- ST- ZIP 2.1 TITLE						Chang		Addition	
TITLE	DVP BALISTRERI, JAMES M.			2.1 IIILE 2.2 NAME									,-		
NAME	**** ** FEDERAL II			2.3 STREET ADDRESS		neess									
STREET ADDRESS	POMPANO BEACH FL			2.4 CITY-1			1								
TITLE	TOM AND DENOTITE		☐ DELETE		TITLE	31-21	<del>"</del>					Chang	je	Addition	
NAME			3.2	NAME											
STREET ADDRESS	TADDRE SS			3.3 STREET AD		ORESS									
CITY-ST-ZIP				3.4.	CITY-S	ST-ZI	Р								
TITLE			☐ DELETE	4.1	TITLE							Chang	ge	☐ Addition	
NAME				4. 2	NAME										
STREET ADDRE :S				43	STREE	1 AD	DRESS								
CITY-ST-ZIP					4 4 CITY-S		>							<b>—</b>	
TITLE			☐ DELETE		TITLE							☐ Chan	je	Addition	
NAME					NAME										
STREET ADDRESS				R	STREE		i								
CITY-ST-ZIP		<del></del>	Dar: cre	к	CITY-S	T-ZI	<u> </u>					Chang		Addition	
TITLE			DELETE	0 1	IIILE		- 1					C Cuant	10	- Addition	

6.2 NAME

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 recuired 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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRE IS

CITY-ST-ZIP

CR2E034 (11/98)