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 # V19166

(0)

TREMONT REALTY, INC.

FILED

Feb 24 1998 8:00am

Secretary of State

Principal Place of Business	Mailing Address	
2300 SAMPLE ROAD POMPANO REACH FL 68442 33975	612 UNION AVENUE FUZARETH NJ 07208	

POMPANO BEACH FL 60442 330 75 ELIZABETH NJ 07208			DO NOT WRITE IN THIS SPACE		
		U\$		3. Date Incorporated or Qualified	JEACE
A Datastant D	-	Lon Marker Addition		03/06/1992	
2. Principal Place of Business 2a. Mailing Address		 		4. FEI Number	Applied For
21		26		65-0319056	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27			Fee Required
City & State City & State			Election Campaign Financing	\$5.00 May Be	
23	28			Trust Fund Contribution	
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible	
24	25	29	30		Yes No
	9. Name and Address of Curren	nt Registered Agent		10. Name and Address of New Registered A	Agent
	<i>i</i> PAO, PLINIO J.		81 Name	pao Plinie I.	
	N. COLLIER BLVD ,		82 Street Add	Iress (P.O. Box Number is Not Acceptable)	
, , ,	7, 901-		2300	WSampic Road	
MA	I ndo Idland FL 3393 7		83 Suit	1 *	
1			84 City		85 Zip Code
		- 1005 IEO E 11 E 1	Pom		75078
office or re	egistered agent, or both, in the State	of Florida, Such change was	authorized by the corpora	poration submits this statement for the purpose of tidn's board of directors. I hereby accept the appli	changing its registered ointment as registered
agent. I ai	m familiar with, and accept the oblig:	ations of Section 607.0505, F	lorida Statutes.	and the board of an object. The cost about the appr	on the following
SIGNATURE					ł
	Signature typed or preside name of registered age		TE: Registered Agent signature requi		
12.	OFFICERS ANI		13.	ADDITIONS/CHANGES TO OFFICERS AND	
TITLE	D	DELETE	1.1 TITLE		K Change Addition
NAME	PIMPAO, PLINIO J.		1.2 NAME		
STREET ADDRESS	58 N. COLLIER BLVD: #801	618 Union AV	e ■ 1.3 STREET ADDRESS	612 Union Ave.	
CITY-S1-ZIP	MAROO ISLAND FL FILE	izabeth, NJ O	72 Q. R. CITY-ST-ZIP	Elizabeth, NJ 07208	
TITLE	D	DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PIMPAO, EDMUND		2.2 NAME		
STREET ADDRESS	612 UNION AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	ELIZABETH NJ 0720	2.0	2.4 CITY-ST-ZIP		
TITLE	0	_ DELETE	31 TITLE		Change Addition
ſſ	PIMPAO, RONALD	La Dittit	f		
NAME			3.2 NAME		ļ
STREET ADDRESS	1270 CLINTON PL, APT 201	. 🚗	3.3 STREET ADDRESS		
CITY-ST-ZIP	ELIZABETH NJ 0720		3.4. CITY-ST-ZIP		<u> </u>
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		Co Max
STREET ADDRESS			5.3 STREET ADDRESS		~ 10/02/N A
CITY-ST-ZIP			5.4 CITY-ST-ZIP		% , I
TITLE		DELETE	6.1 TITLE		Change Addition
		C) ottell			- Average Fill verberger
NAME			6.2 NAME		c v
STREET ADDRESS			6.3 STREET ADDRESS	\sim	SKY !

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 required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attrichment with an address.

SIGNATURE. MILL BYPTER

1/20/98

908 965-1343