

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
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DOCUMENT # F98000000881

1. Corporation Name

LOGAN WEST PALM BEACH REALTY CORP.

Principal Place of Business

11540 HIGHWAY 92 EAST
SEFFNER FL 33584

Mailing Address

11540 HIGHWAY 92 EAST
SEFFNER FL 33584

2. Principal Place of Business

21

Suite, Apt. #, etc

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

SCHWARTZ, LARRY
11540 HIGHWAY 92 EAST
SEFFNER FL 33584

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when changing)

DATE

12. OFFICERS AND DIRECTORS

TITLE

PD

NAME

SEAMAN, JULIE

STREET ADDRESS

11540 HIGHWAY 92 EAST

CITY-STATE-ZIP

SEFFNER FL

TITLE

VD

NAME

FINKEL, JEFFREY

STREET ADDRESS

11540 HIGHWAY 92 EAST

CITY-STATE-ZIP

SEFFNER FL

TITLE

VAS

NAME

SCHWARTZ, LARRY

STREET ADDRESS

11540 HIGHWAY 92 EAST

CITY-STATE-ZIP

SEFFNER FL

TITLE

ST

NAME

STEIN, LEWIS

STREET ADDRESS

500 NORTH BROADWAY, STE 238

CITY-STATE-ZIP

JERICHO NY

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

0000002769288-0

-02/09/99-01046-016

****150.00 ****150.00

02/13/1998

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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 on an attachment with an address, with all other like empowered

SIGNATURE:

Lewis Stein, Secretary

JAN 13 1999

813 623-5400

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILE

Day/Even Phone #

CR2E034 (11/98)