## 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 # 227707

(7)

DOOLEY REALTY, INC.

## **FILED** Apr 16 1998 8:00am Secretary of State



Principal Place of Business		Mailing Address	Mailing Address			I IDBLIG NIGHT NIGHT INDIL TRANS TRANS TO BUT BY
12401 SOUTH DIXIE HIGHWAY		12401 SOUTH DIX	12401 SOUTH DIXIE HIGHWAY			
MIAMI FL 33156		MIAMI FL 33156	MIAMI FL 33156			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified
						09/05/1959
2. Principal P	lace of Business	2a. Mailing Addres	S			4. FEt Number Applied For
21		26				<b>59-6059753</b> Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			S8 75 Additional
22		27	27			5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28	28			Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cc	Country		8. This corporation owes or has paid the current year Intangible
24	25	29	30			Personal Property Tax due June 30.  Yes No
	9. Name and Address of C	urrent Registered Agent		,	r	10. Name and Address of New Registered Agent
DOOLEY, BOBBE W.				81	Name	
12401 S. DIXIE HIGHWAY				82 Street Address (P.O. Box Number is Not Acceptable)		
MLA	MI FL 33156					, , , , , , , , , , , , , , , , , , , ,
				83		
				84	City	<b>85</b> Zip Code
				04	City	FL   63   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, typod or pealled insure of registered agent and till oil applicable (NOTE: Registered Agent signature required when reinstating) DATE						
12.		S AND DIRECTORS	13			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	, -		TITLE	1	☐ Change ☐ Addition	
NAME DOOLEY, BOBBE W.			12 NA			
STREET ADDRESS			1.3 \$		ADDRESS	
CITY-ST-ZIP			CITY-S	T - 7IP		
TITLE				TITLE	ŀ	Change Addition
NAME	DOOLEY,BOBBE W		2.2	NAME		
STREET ADDRESS	12401 S. DIXIE HWY.		2.3 S		ADDRESS	
CITY-ST-ZIP	MIAMI FL			2. 4 CITY-ST-ZIP		
TITLE	D DELETE 3.11		TITLE		Change Addition	
NAME	DOOLEY,BOBBE W.		3.2	NAME		
STREET ADDRESS	12401 S. DIXIE HWY.		3.3	STREET	ADDRESS	
CITY-ST-ZIP	<u>Miami Fl</u>			CITY - S	ST - 21P	
TALE		☐ DELE		TITLE		Change Addition
NAME				NAME		
STREET ADDRESS			4.3	STREET	ADDRESS	
CITY-ST-ZIP				CITY-S	T - ZIP	
TITLE		☐ DELE	TE 5.1	TITLE ,		☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS			5.3	STRFFT	ADDRESS	
CITY-ST-ZIP				CITY-S	T-ZIP	
TITLE		☐ DELE	TE 6.1	TITLE		Change L Addition
NAME			6.21	NAME		
STREET ADDRESS			6.3	STREET	ADDRESS	
CITY+ST-ZIP			6.4 (	CITY-S	T-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 supplied 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 a mattachment with aux-address.