FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE: Daniel



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 350235

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CALOOS	SA REALTY INC							
931 CAPE CORAL PKWY 931 CAPE COR		Mailing Address 931 CAPE CORAL PKWY		·····		JIDN BIBN BIBN BI	II DEDE DEDA	
CAPE CORAL F	FL 33904	CAPE CORAL FL 33904-9	0015		1,			
					3. Date incorporated or Qualified 08/01/1969	3a. Date of 03/04/1		п
2. Principal Place of Business		2a. Mailing Address		4. FEI Number				
21 Suite, Apt.	# ete	Suite, Apt #, etc.			59-1283682	60	Not Ar	pplicable
22	π, εια.	27			5. Certificate of Status Desired	1 1 7 "	Fee Requi	
City & Stat	0	City & State			6. Election Campaign Financing	\$	5.00 Ma	v Be
23		28			Trust Fund Contribution		dded to F	
Zip '''''1	Country	Zip	Count	ry	8. This corporation has liability for i			9.032,
24	9. Name and Address of Curre	29	30		Florida Statutes 10. Name and Address of New Re	Yes No		
CDE	ENE, DANIEL	III regiotorou Agoria	8	1 Name	IV. Hame and Address of Herr Its	Joseph Agon	<u></u>	
	9 SARASOTA CT		ä	2 Street Ad	dress (P.O. Box Number is Not Acceptab			
	E CORAL FL 33904	-		2 Street Act	dress (F.O. Dox Number is not receptab			
			8	3				
			8	4 City		85	Zip Cod	Je
44 0	to the man foliage of Castiana CO7 OF	00 and 007 1500 Flatido Stat	tee the sho		and the authorite this statement for the	FL 8	L sing ito so	nioto and
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat	e of Florida. Such change was	s authorized I	by the corpor	propriation submits this statement for the parties ation's board of directors. I hereby acceptation's	or the appointm	ent as reg	istered
	am tamiliar wan, and accept the oblig	gations of, Section 607.0505, r	Florida Statuti	es.				
SIGNATURE	Stor after, typed or per tea name of registered ag	gent and fille Lapp loable. (NO	OTE: Registered A	gent signature req	uired when reinstating)	DATE		***************************************
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
1/fLE	PD DELETE		1.1 TITLE				hange	_] Addition
NAME	GREENE, DANIEL 5239 SARASOTA CT.		1.2 NAME					
STREET ADORESS	CAPE CORAL FL		•	ET ADDRESS				
CHY-ST-ZIF	STD	DELETE	1.4 CITY 2.1 TITLE				hange	Addition
NAME	GREENE, DORIS L.		2.2 NAME					
STHEET ADDRESS	5239 SARASOTA COURT			ET ADDRESS				
CHT-ST-ZIP	CAPE CORAL FL		2. 4 CITY	-ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE				hange	Addition
NAME			3.2 NAM	£				
STREET ADDRESS			3.3 STAE	ET ADDRESS				
C-TY - S1 - ZIP		L OF CER	3.4. CITY	····			<u> </u>	1
THILE		DELETE	4.1 TITLE			LJ Ü	hange [_	Addition
MAVÉ			4. 2 NAM					
STREET ADDRÉSS				ET ADORESS				
CITY - ST - ZIP TITLE		DELETE	4.4 CITY 5.1 TITLE				hange	Addition
NAME		hand preserve	5.2 NAMI				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
STREET ADDRESS				ET ADDRESS				
CITY-SI-7-2			5.4 CITY-					
1 TLF		☐ DELETE	6.1 TITLE				hange	Addition
NAME			6.2 NAM	E				į
STREET ADDRESS			6.3 STRE	ET ADDRESS				
017.1 67 3.0	1		0.4.0179	07 710				

14. I do hereby certily 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 informal on indicated on this annual report or supplemental annual report is true and ecorate 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 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 on an attachment with an address.