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

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| PROFIT CORPORATION ANNUAL REPORT 1997           |   | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |                   |                       | May 01 1997 8:00a<br>Secretary of State                                      |                            |                              |
|---|---|---|-------------------|-----------------------|--|----------------------------|------------------------------|
| 1. Corporation N                                | MENT # 355210<br>lame<br>EALTY INC        | (6)   |                   |                       |  |                            |                              |
| Principal Place                                 | of Business                               | Mailing Address   | 8                 |                       | _  |                            |                              |
| SANOS R   | EALTY INC S                               | ANOS REAL   | LTY INC           |                       |  |                            |                              |
| 701 SW 60 AVENUE 701 SW 60 AVENUE               |   |   |                   |                       | 2 Data Incompared of Available   | ied   3a, Date of Last Re  |                              |
| PLANTAT   | ION FL 33317 F                            | LANTATION   | ION FL 33317      |                       | 3. Date incorporated or Qualification 11/13/1969                             | 04/20/19                   | •                            |
| 2. Principal Plac                               |   | 2a. Mailing Addre   | 988               |                       | 4. FEI Number  |                            | Applied For                  |
| Suite, Apt. #, e                                | alc.                                      | 26 Sulte, Apt. #,   | etc.              |                       | 59-1287766   | A   L.                     | Not Applicable  5 Additional |
| 22  |   | 27]   |                   |                       | 5. Certificate of Status Desire  | d [ Fe                     | e Required                   |
| City & State 23                                 |   | City & State  |                   |                       | 6. Election Campaign Finance Trust Fund Contribution                         |                            | 00 May Be<br>led to Fees     |
| Zip   | Country                                   | Zip   | Ca                | ountry                | 8. This corporation has liability  | y for Intangible tax unde  |                              |
| 24]   | 25  | 29  | 30                | <del></del>           |  | Yes No                     |                              |
| 9. Name and Address of Current Registered Agent |   |   |                   | 81 Name               | 10. Name and Address of Nev  | v Registered Agent         |                              |
| SWEITZER, JOHN                                  |   |   |                   | 82 Street Ad          | dress (P.O. Box Number is Not Ac   | ceptable)                  |                              |
| 701 SW 60 AVE                                   |   |   |                   | 83                    |  |                            |                              |
| PLANTATION, FL                                  |   |   |                   |                       |  | / **                       |                              |
| 33317   |   |   |                   | 84 City               |  | FL  85   Z                 | ip Code                      |
| office or regis                                 | stered agent, or both, in the State of    | f Florida. Such chan  | ge was authorize  | ed by the corpora     | rporation submits this statement fo<br>tion's board of directors. I hereby a |                            |                              |
| agent. I am fa                                  | amiliar with, and accept the obligat      | lons of, Section 607.   | 0505, Florida Sta | atutes.               | •  | .,                         |                              |
| SIGNATURE                                       | Signature, typed or printed name of regin | stered egent and title if   | applicable.       | (NOTE: Registere      | d Agent signature required when reinsta                                      | ling) DATE                 |                              |
| 12.   |   | ND DIRECTORS  |                   | 13.                   | ADDITIONS/CHANGES TO   |                            | CTORS IN 12                  |
| TITLE<br>NAME                                   | P<br> SWEITZER, JOHN                      |   | DELETE            | 1.1 TITLE<br>1.2 NAME |  | Change                     | Addition 66                  |
| STREET ADDRESS                                  | 701 SW 60 AVE                             |   |                   | 1.3 STREET ADDRE      | ess  |                            | CR2E034                      |
| OTY - ST - ZIP                                  | PLANTATION, FL                            |   |                   | 1.4 CITY - ST - ZIP   |  | ·                          |                              |
| TITLE<br>NAME                                   | SWEITZER, JOHN                            | J D'  | DELETE            | 2.1 TITLE<br>2.2 NAME |  | Change                     | Addition                     |
| STREET ADDRESS                                  | 701 SW 60 AVE                             |   |                   | 2.3 STREET ADDRI      | :58  |                            |                              |
| CITY - ST - ZIP                                 | PLANTATION, FL                            |   |                   | 2.4 CITY - ST - ZIP   | <del></del>  | ···                        |                              |
| TITLE<br>NAME                                   | SWEITZER, MARG                            | ARET 🗆'   | DELETE            | 3.1 TITLE<br>3.2 NAME |  | Change                     | Addition                     |
| STREET ADDRESS                                  | 701 SW 60 AVE                             |   |                   | 3.3 STREET ADDR       | :88  | (1                         | <b>%\\\</b> \                |
| CITY - ST - ZIP                                 | PLANTATION, FL                            | 33317   |                   | 3.4 CITY - ST - ZIP   |  |                            | <b>₹</b> ¬\``                |
| TITLE<br>NAME                                   |   |   | DELETE            | 4.1 TITLE<br>4.2 NAME |  | Change                     | Addition                     |
| STREET ADDRESS                                  |   |   |                   | 4.3 STREET ADDR       | :88  |                            |                              |
| CITY - ST - ZIP                                 |   |   |                   | 4.4 CITY - ST - ZIP   | ···  |                            |                              |
| TITLE<br>NAME                                   |   | ים  | DELETE            | 6.1 TITLE<br>6.2 NAME |  | Change                     | Addition                     |
| STREET ADDRESS                                  |   |   |                   | 5.3 STREET ADDR       | :88  |                            |                              |
| CITY - ST - ZIP                                 |   |   |                   | 5.4 CITY - 87 - ZIP   |  | <u> 216753</u> ;           |                              |
| TITLE<br>NAME                                   |   |   | DELETE            | 6.1 TITLE<br>6.2 NAME | -05/06/97  | 0106 <del>6</del> 0 chalge | Addition                     |
| STREET ADDRESS                                  |   |   |                   | 8.3 STREET ADDR       | ***165.00  |                            |                              |
| CITY - ST - ZIP                                 |   | · · · · · · · · · · · · · · · · · · ·   |                   | B.4 CITY - ST - ZIP   |  |                            |                              |
|   |   |   |                   |                       | ed in Section 119.07(3)(I), Florida and my signature shall have the sar      |                            |                              |

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, grown an attachment with an address.

SIGNATURE: Lack Durung Loth Sweit 17258 4.24.97 474 697 3

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #