**FILED** 

Mar 17, 1999 8:00 am Secretary of State

03-17-1999 90134 044 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 382153

1. Corporation Name

HARBOUR REAL ESTATE CORPORATION

Principal Place of Business Mailing Address						F ERBYAN INTAL INTIN 11981 ITANI	108      818   91	#11 #2#15 #1#15 #	
4975 SW 85 ST 4975 SW 85 ST									
MIAMI FL 33143 MIAMI FL 33143						DO NOT WRI	ITE IN THIS	SDACE	
us us					1	Date Incorporated or Qualifed	_	3FACE	
	•				3.	05/14/1971			
2. Principal Pl	ace of Business	2a. Mailing Address		·-	4.	FEI Number	_	Ap	plied For
21		26				59-1354309		No	t Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			_		5	Certifcate of Status Desired		\$8.75 A	
22 27								Fee Re	·
City & State City & State					6.	Election Campaign Financing		\$5.00	
28     Zip   Country   Zip   Cou			Country			Trust Fund Contribution		Added t	o rees
Zip			¬	,	8.	This corporation owes the curr Personal Property Tax.	ent year inta		□No
24	9. Name and Address of Cur		<u>''                                   </u>		10.	Name and Address of New I	Registered /		
81									
WERNER, SETH 4975 SW 85 ST				Street	Address (P	O. Box Number is Not Accepta	able)		
MIAMI FL 33143			83						
	•								
			84	City			FL	85 Zip 0	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 it 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 ragent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							changing its itment as re	registered gistered	
SIGNATURE									
	Signature, typed or printed name of registered	agent and title if applicable. (NOTE: Re AND DIRECTORS	gistered Age 13.	nt signature r	required when n	einstating) ADDITIONS/CHANGES TO OF	DATE FICERS AN	D DIRECTO	RS IN 12
TILE	PSTD	DELETE	1.1 TITLE		<del></del>	ADDITIONS/OFFAIGES TO OF	TIOENO ATT	☐ Change	Addition
NAME	WERNER, SETH		1.2 NAME						
STREET ADDRESS	4975 SW 85 ST			T ADDRESS					
CITY-ST-ZIP	MIAMI FL		1.4 CITY-9						
TITLE		DELETE	2.1 TITLE				_	Change	☐ Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREE	T ADDRESS					
CITY-ST-ZIP	<u></u>		2. 4 CITY-	ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREE	TADORESS					
CITY-ST-ZIP			34, CITY-	ST-ZIP				[] Change	C Addition
TITLE		☐ DELETE	4.1 TITLE					Change	☐ Addition
NAME			4. 2 NAME		}				
STREET ADDRESS				TADDRESS	1				
CITY-ST-ZIP		DELETE	4.4 CITY-9 5.1 TITLE	si-ZIP				[7] Change	Addition
TITLE		□ oereie	5.1 HILE 5.2 NAME					E'l cuango	
NAME				TADDRESS					
STREET ADDRESS			54 CITY-5						
CITY-ST-ZIP									

CITY-ST-ZIP 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 seport 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 out of like empowered.

6.2 NAME

6.3 STREET ADDRESS

DELETE

SIGNATURE:

TITLE

NAME

STREET ADDRESS

Seth Werner SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2/8/99

954-452-0000

Daytime Phone #

Change

Addition