FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996
DOCUMENT #
1. Corporation Name

SIGNATURE:

414351

(7)

EARTH REALTY, INC.

Principal Place of Business Mailing Address					
2316 \$ ATL DAYTONA E US	ANTIC AVE BEACH SHORES FL 32127	6348 PALMAS BAY PORT ORANGE FL US	=		
				3. Date Incorporated or Qualified 12/11/1972	3a. Date of Last Report 02/07/1995
2. Principat Plac	e of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt. #,	oto	26 Suito Apt # oks		59-1450885	Not Applicable
22	e.c.	Suite, Apt #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Z(p)	Country 25	Zip 29	Country 30	8. This corporation has liability for in Florida Statutes Yes	
	9. Name and Address of Curr	ent Registered Agent	81 Name	10. Name and Address of New Ro	gistered Agent
2316 S DAYTO 11. Pursuant to or registered	MICHAEL V. ATLANTIC AVE NA BEACH SHORES FL 321 The provisions of Sections 607.05 I agent, or both, in the State of Fix, and accept the obligations of, Se	02 and 607,1508, Florida Statu vida. Such channe was authori	84 City 50VF tes, the above named corporated by the corporation's hoz	ress (P.O. Box Number is Not Acceptable South Wova May to War South Wova May to War Statement for the purport of directors. I hereby accept the appo	EL 85 Zp COOR 9
SIGNATURE	grature, type diociprinted mene of regulared ag				
12.		ND DIRECTORS	OTE: Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
)ITLE	PS	DELETE	1. 1 TITLE		Change Addition
NAME	BIRO, MICHAEL V.		1.2 NAME		
STREET ADDRESS	6348 PALMAS BAY CIRC	CLE	1.3 STREET ADDRESS		
C 1Y - \$1 - ZiP	PORT ORANGE FL		1.4 CiTY-ST-ZIP		
TILE		DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
C(TY - ST - Z(P)			2 4 CITY - ST - ZIP		
THE		DELFTE	3 1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP			3.4 CITY-ST-ZIP		
THE		☐ DELETE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		•
CITY ST ZIP			4.4 CITY - ST - ZIP		
FILE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CHY-S1-ZIF		•	5 4 CITY - ST - ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADOPESS			6.3 STREET ADDRESS		
CITY-SE-ZIP			6 4 CITY-ST-ZIP		
14. I do hereby	certify that the information supplie re information indicated on this ar rm an officer or director of the cor Block 12 or Block 13 if changed	of with this filing is voluntarily fun inual report or supplemental and poration or the receiver or truste for an attachmen with an ado	nished and does not qualify t	for the exemption stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flo	17(3)(k), Florida Statutes. I further lame legal effect as if made under rida Statutes; and that my name