## 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

|   | MENT # 443103<br>X REALTY, INC.                             | 3 (7)                                   |  |   |
|---|---|---|--|---|
| Principal Place                         | e of Business   | Mailing Address                         |  |   |
| 8851 S.W. 52ND STREET<br>MIAMI FL 33165 |   | B851 S.W. 52ND STREET<br>MIAMI FL 33165 |  | DO NOT WRITE IN THIS SPACE  |
|   |   |   |  | 3. Date Incorporated or Qualified   |
| 8 Principal P                           | loop of Purioses  | 2a. Mailing Address                     |  | 12/31/1973<br>4. FEI Number Applied For   |
| 2. Principal Place of Business 21       |   | 26. Mailing Address                     |  | 4. FEI Number Applied For   |
| Suite, Apt                              | #, etc.   | Suite, Apt #, etc.                      | ···· <u>····</u>                             | SR 75 Additional  |
| 22                                      |   | 27                                      |  | 5. Certificate of Status Desired Fee Required   |
| City & State                            | C   | City & State                            |  | 6. Election Campaign Financing \$5.00 May Be  |
| Zip                                     | Country   | 28                                      | Country                                      | Trust Fund Contribution Added to Fees   |
| 24                                      | 25  | <b>├</b> ── '                           | 30   | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes No   |
|   | 9. Name and Address of Curren                               |   |  | 10. Name and Address of New Registered Agent  |
| 8851 SW 52 ST.  MIAMI FL 33165-3716  83 |   |   | 82 Street Ac                                 | MARCIA E. Tyksias  diress (P.O. Box Number is Not-Acceptable)  \$ 2 St.   |
|   |   |   | 84 City                                      | Miami FL 85 Zip Code 33/65  |
| SIGNATURE                               | MARCIA  Signature, typed or printed nance of tegistered age | Allons of, Section 607,0505, Flo        | rida Statutes.  Registered Agent's grande re | corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered $3 - 10 - 9P$ Equivalently when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
| TITLE                                   | SVP   | DELETE                                  | 1.1 DITLE                                    | _   |
| NAME                                    | IGLESIAS, ANTONIO   |   | 1.2 NAME                                     | CARMAN L. TELCSIAS  8861 SW 62 St.  |
| STREET ADDRESS                          | 8851 S.W. 52ND ST.  |   | 1.3 STREET ADDRESS                           | 8861 SW 62St.   |
| CITY-ST-ZIP                             | MIAMI FL  |   | 1.4 CITY-ST-ZIP                              | Miami FC 33/65  |
| TITLE                                   | PT  | L DELETE                                | 2.1 TITLE                                    | ☐ Change ☐ Additio  |
| NAME                                    | IGLESIAS, MARCIA E.   |   | 2.2 NAME                                     |   |
| STREET ADDRESS                          | 8851 S W 52ND ST  |   | 2.3 STREET ADDRESS                           |   |
| CITY-ST-ZIP                             | MIAMI FL  | DELETE                                  | 2.4 CITY - ST - 7IP<br>3.1 TITLE             | ☐ Change ☐ Additio  |
| NAME                                    |   |   | 31 HILE<br>32 NAME                           | Change   Addition   |
| STREET ADDRESS                          |   |   | 3 3 STREET ADDRESS                           |   |
| CITY-ST-ZIP                             |   |   | 3.4. CITY-ST-ZIP                             |   |
| TITLE                                   |   | DEL ETE                                 | 4.1 TITLE                                    | ☐ Change ☐ Additio  |
| NAME                                    |   |   | 4. 2 NAME                                    | • —   |
| STREET ADDRESS                          |   |   | 4.3 STREE1 ADDRESS                           |   |
| CITY-ST-ZIP                             |   |   | 4.4 CITY - ST - ZIP                          |   |
| TITLE                                   |   | DELETÉ                                  | 5.1 TITLE                                    | ☐ Change ☐ Addition   |
| NAME                                    |   |   | 5.2 NAME                                     |   |
| STREET ADDRESS                          |   |   | 5.3 STREET ADDRESS                           |   |
| CITY-ST-ZIP                             |   | T octor                                 | 5.4 CITY-ST-ZIP                              |   |
| TITLE                                   |   | ☐ DELETE                                | 61 TITLE                                     | L Change Addition   |
| NAME CARGODICO                          |   |   | 6.2 NAME                                     |   |
| STREET ADDRESS                          |   |   | 6.3 STREET ADDRESS                           |   |

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 logal offect as if made under oath; that I am an officer or director of the corporation or the deceiver 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 any attachment with an address.

SIGNATURE:

MARCIA E. TELLIA

3-10-97

**FILED** 

Apr 03 1998 8:00am

Secretary of State