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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

FILED

Jan 22, 1999 8:00am

Secretary of State

01-22-1999 90076 009 ***150.00

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 445040

THE BAAL REALTY GROUP, INC.

| Principal Place | o of Business | Mailing Address | | | | | | | | |
|--|---|-------------------------------------|--|---|-------------------|---|-------------------------|----------------------------|---|--|
| • ' | • | · - | | | | | | | | |
| 13505 SW 72ND CT. | | | | | | | | | | |
| US US | | | | | | DO NOT WRITE IN THIS SPACE | | | | |
| 00 | | | | | ⊢, | 3. Date Incorporated or Qualifed | | | | |
| | | | | | 1 | | | | | |
| | WB | | | | | 01/30/1974 | | | | |
| 2. Principal P | Place of Business | 2a. Mailing Address | | | 4 | 4. FEI Number | | | Applied For | |
| 21 | • | 26 | | | | 59-1635083 | | | Not Applicable | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | E Continue of Status Desired | | \$8.75 | Additional | |
| 22 | | 27 | | | 1 5 | 5. Certifcate of Status Desired | | Fee F | Required | |
| City & Stat | te | City & State | | | | 6. Election Campaign Financing | | \$5.00 | May Be | |
| 23 | | 28 | | | | Trust Fund Contribution | | • | to Fees | |
| Zip | Country | Zip | Coun | irv | | | rent year Int | tannible | | |
| ⊢ | | ⊢ ' | · — · | | | 8. This corporation owes the current year Intangible Personal Property Tax. | | | | |
| 24 | [25] | 29 | 30 | | | Personal Property Tax. Name and Address of New I | Pagistarad | | | |
| | 9. Name and Address of Current | t Registered Agent | | M Nieros | | u. Name and Address of New (| Registered | Agent | | |
| | U DODERT C | | | Name | | | | | | |
| DAA | NL,ROBERT G. | | 1 | 32 Stree | t Address (| (P.O. Box Number is Not Accepta | able) | | | |
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| MIAI | MI FL | | 1 | 33 | • | | | 717 | 1.7141154 | |
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| | | | 1 | 34 City | | | FI | 85 Zip | Code | |
| reces our man- | 5) / T | 300 110 000 110 | | | , | · | | ■ | ta registered | |
| 11., Pursuant | to the provisions of Sections 607.0502 registered agent, or both, in the State of | 2 and 607.1508, Florida Sta | stutes, the abo | ove-named | d corporation's l | ion submits this statement for the board of directors. I hereby acces | purpose of the appoi | cnanging i intment as i | is registered reaistered | |
| agent. La | am familiar with, and accept the obligation | ions of, Section 607.0505. | Florida Statut | es. | porations | board of amoutors. Thereby dees, | prate appar | | -3 | |
| - | | | | | | | | | | |
| | | | | | | | | | | |
| SIGNATURE | Signature, typed or printed name of registered agent | t and title if applicable. (N | OTE: Registered A | gent signature | required wher | n reinstating) | DATE | | | |
| 12. | Signature, typed or printed name of registered agent | | OTE: Registered A | gent signature | required wher | n reinstating) (1); ; ; ; ; ; ADDITIONS/CHANGES TO OF | | ND DIRECT | ORS IN 12 | |
| 12. | | | 13. | | required wher | | | ND DIRECT | | |
| 12. TITLE | OFFICERS AND | D DIRECTORS | 13. 1.1 TITL | | e required where | ADDITIONS/CHANGES TO OF | | | | |
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6.2 NAME

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 trustal 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 on on an attack ment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

CITY-ST-ZIP

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305 546 65 31