SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1999

BUTTONWOOD BAY A7

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FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

SIVISION OF CORPORATIONS

DOCUMENT # 446946

KIRK & ASSOCIATES REAL ESTATE, INC.

Mailing Address Principal Place of Business 96000 O/S HWY 96000 O/S HWY

BUTTONWOOD BAY A7 DO NOT WRITE IN THIS SPACE

KEY LARGO FL 33037 KEY LARGO FL 33037 3. Date Incorporated or Qualified US 02/26/1974 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address Not Applicable 59-1515728 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be City & State City & State 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 Country Zip Zìp This corporation owes the current year Yes ☐ No

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9. Name and Address of Current Registered Agent KIRK, CHARLES L. MM 961/2 - A-7 KEY LARGO FL 33037

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	Intangible Personal Property. Yes No						
10. Name and Address of New Registered Agent							
81	Name						
82	Street Address (P.O. Box Number is Not Acceptable)						
83							
84	City E1 85 Zip Code						

FILED

Aug 02, 1999 8:00 am Secretary of State

08-02-1999 90013 033 ***150.00

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 its registered 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 registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE Sinosture lyped or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) DATE							
- Capacitati Appendix			13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.			1,1 TITLE	7.0011101101011111020110			
TITLE	PD	DELETE	1		Change Addition		
NAME	KIRK,CHARLES L.		1.2 NAME		ĺ		
STREET ADDRESS	MM 961/2 - A-7		1.3 STREET ADDRESS				
CITY-ST-ZIP	KEY LARGO FL 33037		1.4 CITY-ST-ZIP				
TITLE	STD	DELETE	2.1 TITLE		Change Addition		
NAME	SCHWARTZ,PEGGY J.		2.2 NAME				
STREET ADDRESS	2490 SOUTH PARK RD #205		2.3 STREET ADDRESS				
CITY-ST-ZIP	HALLANDALE FL		2.4 CITY-ST-ZIP				
TITLE		DELETE	3.1 TITLE		Change Addition		
NAME .	-		3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS				
CITY-ST-ZIP			3.4 CITY-ST-ZIP				
TITLE	\$ 1.	DELETE	4.1 TITLE		Change Addition		
NAME	:		4.2 NAME				
STREET ADDRESS	°. ₹		4.3 STREET ADDRESS				
CITY-ST-ZIP			4.4 CITY-ST-ZIP				
TITLE		☐ DELETE	5.1 TITLE		Change Addition		
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDRESS				
CITY-ST-ZIP			5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		Change Addition		
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDRESS		ı		
CITY-ST-ZIP			6.4 CITY-ST-ZIP				
14. I hereby configured that the information curreling duting the 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 report 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.

SIGNATURE: