## 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 # 470896 1. Corporation Name

REALCO INTERNATIONAL ENTERPRISES, INC.

Principal Place of Business 1000 E. ISLAND BLVD., #604 NORTH MIAMI FL 33160

Mailing Address

1000 E. ISLAND BLVD., #604 NORTH MIAMI FL 33160

## **FILED** Feb 19, 1999 8:00am **Secretary of State**

02-19-1999 90051 020 \*\*\*150.00



		HORITI MINIMI JE SSTOO					DO NOT WRITE	IN THIS	SPACE	
i						3. Date incorporate	ed or Qualifed			
						01/22/1975				
_	Place of Business	2a. Mailing Address				4. FEI Number			A	pplied For
21 Cuita Ant	4	26				<u>59-1575464</u>				ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Sta	itus Desired	] _		Additional
City & Stat	10	City & State						-	- Fee Re	· · · · · · · · · · · · · · · · · · ·
23	i.e.	<del>├</del>				6. Election Campai		3	•	May Be
Zip	Country	28   Country Zip Countr				Trust Fund Cont				to Fees
24	25	. — '	30	у		8. This corporation		year Int	*/	□No
[24]	9. Name and Address of Currer		301			Personal Proper 10. Name and Add		etorod	Yes	
	The state of the s	it registered Agent	81	I N	lame	IV. Name and Add	ress of New Regi	stele0	Agent	
BERG, HERBERT A.				Turns						
1000 E. ISLAND BLVD., #604				82 Street Address (P.O. Box Number is Not Acceptable)						
NORTH MIAMI FL 33160			83							
			"	1						1
			84	С	ity	14.		FL	85 Zip (	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	s, the abov	e-na	med corpor	ation submits this stat	tement for the pure	nose of	 changing its	registered
office or n	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was au	ithorized by	the!	corporation	's board of directors.	hereby accept the	e appoir	ntment as re	gistered
	m rammar with, and accept the obliga	mons of, Section 607,0505, Flon	ioa Statutes	S.						
SIGNATURE	Signature, typed or printed name of registered ager	nt and title if applicable. (NOTE:	Registered Age	nt sior	nature required w	men reinstating)		DATE		
12.		ID DIRECTORS	13.				NGES TO OFFICE		D DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1,1 TITLE						☐ Change	Addition
NAME	Berg, Herbert A.		1.2 NAME		ļ	•			_ •	_
STREET ADDRESS	1000 E. ISLAND BLVD., #604		1.3 STREE	T ADD	RESS					ł
CITY-ST-ZIP	N. MIAMI FL 33160		1.4 CITY-S							
TITLE	VT	☐ DELETE	2.1 TITLE		·-		• •	-	Change	Addition
NAME	BERG, CAROLE		2.2 NAME				**			ا
STREET ADDRESS	1000 E. ISLAND BLVD., #604		2.3 STREE	TANN	RESS	•				į
CITY-ST-ZIP	N. MIAMI FL 33160		2. 4 CITY-5				•			
TITLE		☐ DELETE	3.1 TITLE	) I - CII					Change	Addition
NAME			3.2 NAME				•			3
STREET ADDRESS			3.3 STREET	TADD	DESS	,				-
CITY-ST-ZIP			3.4. CITY- S							ì
TITLE		☐ DELETE	4.1 TITLE	1-211					Change	Addition
NAME		<del>-</del>	4. 2 NAME						<del></del>	
STREET ADDRESS			4.3 STREET	LVUU	PESS					
CITY-ST-ZIP			4.4 CITY-S							
TITLE		☐ DELETE	5.1 TITLE	1-412					Change	Addition
NAME			5.2 NAME			•			onange	
STREET ADDRESS			5.3 STREET	Γ ADDI	RESS					
CITY-ST-ZIP			5.4 CITY-ST							
TITLE		☐ DELETE	6.1 TITLE				*		Change	Addition
NAME			6.2 NAME							☐ Madigoti
STREET ADDRESS			6.3 STREET	r <b>∆</b> DD¤	RESS					
CITY-ST-ZIP			6.4 CITY-ST	I-⊿P						ļ

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 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 any address, with all other like empowered. address, with all other like empowered.

**SIGNATURE:**