## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**CORPORATION ANNUAL REPORT** 

1997

Principal Place of Business

843 US HWY 1/POB 14701 NORTH PALM BEACH FL 33408



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 484432

(0)

643 US HWY 1/POB 14701 NORTH PALM BEACH FL 33408-4605

Mailing Address

ALERT REALTY INVESTMENTS, INC.

**FILED** May 29 1997 8:00am Secretary of State



					Date of Last Report 4/25/1996
2. Principal Place of Business 2a. Mailing Address				4. FEI Number	Applied For
21 Principal Place of Business		26. Walling Address		59-1623757	Not Applicable
Sulte, Apt. #, etc. Suite, Apt. #, etc.				\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangit	ole tax under s. 199.032,
24	25	29	30	Florida Statules	
9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
SEGAL, ÉMANUEL 81 Name					
4629 SPRUCE LANE				2 Street #gyrg/ss/P.O. Box Nambol is Not Ad Patable /	
PALM BEACH GARDENS FL 33410 9/8/VOUN WICE 18W7J					<i>V1J</i>
83 PAROX 14701					
I			84 CiA /	21 000 -	. 85 28 Posto D
•				Talm beach F	_
11. 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					
	Signature, typed or printed name of registered ag		NOTE: Registoreo Agent signature re		
12.	PD OFFICERS AN	D DIRECTORS  DELETE	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS A	Change Addition
TITLE	SEGAL, EMANUEL	· Deterie			* *
NAME	4629 SPRUCE LANE		1.3 STREET ADDRESS	918 Northlake BLVD	1
STREET ADORESS	PALM BCH GRONS FL		1.3 STREET AUDRESS	North Polar Reach F	:1.33408
CITY-ST-ZIP TITLE	80	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	918 Northlake BLVII North PALM BLACH, P 918 Northlake BLVII PO BOX 14701 North PALM BEACH, 1	Change Addition
NAME	SEGAL,MARTA	_ better	2.2 NAME .	4/8 NORTHLAKE ISLUKT	A samp
STREET ADDRESS	4629 SPRUCE LANE		2.3 STHEET ADDRESS	PO BOX 14701	
CITY-ST-ZIP	PALM BCH GRONS FL		2. 4 DITY-ST-ZIP	WARTH PALM REACH	FL. 33408
TITLE		DELETE	3.1 TITLE	VOINT THE THE TANK	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	•	
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		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	51 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	7000022036 -06/06/9701003	ñξ4' Ψε
STREET ADDRESS			6.3 STREET ADDRESS	***165.00	°°° '5.2.9
CITY-ST-ZIP		···	6.4 CITY-ST-ZIP		<del></del>
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Soction 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 of the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it is greatly for an anattagriment with an address.					