Apr 07, 1999 8:00 am Secretary of State

04-07-1999 90047 027 ***150.00

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 # FOO 404

1. Corporation	IAMI REALTY, INC.						
Principal Place of Business Mailing Address					. I idelet bisse stem telst dien mett eten eine eren eren eren eren eren	100,	
CAPE CORAL FL 33904		412 SE 33RD STREET CAPE CORAL FL 33904			DO NOT WRITE IN THIS SPACE		
US		03			3. Date Incorporated or Qualifed 02/17/1977		
2. Principal Place of Business 2a. Mailing Addres					4. FEI Number Applied Fo	r	
26				59-1724436 Not Applica	able		
Suite, Apt. #, etc.		Suite, Apt. #, etc			5. Certificate of Status Desired Fee Required	al	
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
23		28			Trust Fund Contribution Added to Fees		
Zip 24	Country 25	Zip	Countr	y	8. This corporation owes the current year Intangible Personal Property Tax.		
241	9. Name and Address of Current		<u> </u>		10. Name and Address of New Registered Agent		
			8	Name	,	ļ	
SENDRA, JOSE A. 412 SE 33RD STREET			8:	Street A	Street Address (P.O. Box Number is Not Acceptable)		
CAPE CORAL FL 33904			8:	3			
			84	City	85 Zip Code		
	•		.	1 -	FL		
office or re	to the provisions of Sections 607,050, egistered agent, or both, in the State of m familiar with, and accept the obligat	of Florida. Such change was aut	norized b	v tne corpo	d corporation submits this statement for the purpose of changing its register poration's board of directors. I hereby accept the appointment as registered	_	
- CIGITATIONE	Signature, typed or printed name of registered agen	· · · · · · · · · · · · · · · · · · ·		ent signature re	e required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	12	
12.	OFFICERS AN	D DIRECTORS	13.	- 1	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN T		
TITLE	PTD CENTRAL IOCE A	U DELETE	1.1 TITLE	l			
NAME	SENDRA, JOSE A		1.2 NAME			ì	
STREET ADDRESS			1.3 STREET ADDRESS		•	1	
CITY-ST-ZIP	S DELETE		1.4 CITY-ST-ZIP 2.1 TITLE		Change Ad	dition	
TITLE	MARQUEZ, CARMEN		2.2 NAME	l			
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NAME STREET ADDRESS				ET ADDRESS	s	ĺ	
REFOREST ANNOUGE CO			V-0 O () ()		T1 .	1	

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 path; 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 changer for on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

941-5736131