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

**FILED** Mar 12 1998 8:00am **PROFIT** ELORIDA DEPARTMENT DE STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS **DOCUMENT #** 557931 (3)SOUTH FLORIDA REALTY & APPRAISAL CO. Principal Place of Business Mailing Address 541 SOUTH ST. ROUD #7 541 SOUTH ST ROAD #7 STE 5 DO NOT WRITE IN THIS SPACE MARGATE FL 33068 MARGATE FL 33068 3. Date Incorporated or Qualified 01/24/1978 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 59-1805714 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Žιρ Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CLARK, KIMBERLY S 3000 RIVERSIDE DR 82 Street Address (P.O. Box Number Is Not Acceptable) **CORAL SPRINGS FL 33085** 83 84 City Zip Code 65 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 (NOT) Registered Agent signature required when reinstating) 12 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE Change Addition TITLE CLARK, KIMBERLY S 1.2 NAME NAME 1.3 STREET ADDRESS 3000 RIVERSIDE DR STREET ADDRESS **CORAL SPRINGS FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TIFLE TITLE VD HARRIS, JACK W NAME 2.2 NAME 1455 NW 92ND WAY STREET ADDRESS 2.3 STREET ADDRESS CORAL SPRINGS, FL 00000 CITY-ST-ZIP 2. 4 CITY-ST-ZIP Addition DELETE TITLE 3.1 TITLE 3.2 NAME MAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELFTE Channe Addition TITLE 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP

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 suppliemental 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

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELE 1E

SIGNATURE:

TITLE

NAME

STREET ADDRESS CITY-ST-ZIP

KIMBERLY S. CLARK

Change

Addition