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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEFARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 586573

Corporation Name

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90235 049 ***150.00

A.H. RE	ALTY, INC.									
Principal Flac	e of Business	Mailing Address			7	1 18118 81181 81111 1888 1111	, 61451 641			
2510 SO FLORIDA AVE 2510 SO FLORIDA AVE										
LAKELAND FL 33803 LAKELAND FL 33803						DO NOT WRITE IN	THIS S	SPACE		
					3. Date Incorpora					
					09/15/1978					
2 Dringing D	Place of Business	2a. Mailing Address			4. FEI Number	<u> </u>			Ap slied	For
	Tace of Business	26			59-1851762)			_ -	plicable
Suite, Apt.	# etc	Suite, Apt. #, etc.						\$8.7	5 Additi	
22		27			5. Certifeate of St	atus Desired 🔲		Fee	Re juire	ed
City & Sitat	te	City & State			6. Electic n Camp	aign Financing		\$5.0	00 vlay	/Be
23		28			Trust Fund Co	ntribution			ed to Fe	
Zip	Zip	Country		8. This corporation	n owes the current y	ear Inta		_	4	
24	25	29 30	l		Personal Prop			Yes		No
	9. Name and Address of Current	Registered Agent		· ———	10. Name and Ad	dress of New Regis	tered A	gent		
MCE	NAMES ANDRES		81	Name						ļ
	RNANDEZ, ANDRES		82	Street Addr	ess (P.O. Bo): Numbe	r is Not Acceptable)				
	O S FLA AVE		<u> </u>							
	ELAND, FL		83							
338	U3		84	City				85 2	Zip Code	
	to the provisions of Sections 607.0502			,			<u>FL</u>	Щ.		
office (it i	registered agent, or both, in the State of am familiar with, and accept the obligat	t Florida. Such change was auth- ions of, Section 607.0505, Florida	orized by Statutes	the corporate	d when reinstating)	. т петеру ассерт те	ATE	щпен а		ereu .
12.	OFFICERS ANI		13.	n signatoro roquino	ADDITIONS/CH	ANGÉS TO OFFICE	RS AN	D DIREC	CTORS	IN 12
TITLE	PTD	☐ DELETE	1.1 TITLE	T				Chan	ige [] Addition
NAME	HERNANDEZ, ANDRES		1.2 NAME							
STREET ADDRESS	TATO HOLLINGOWODTH OAKS		1.3 STREE	TADDRESS						
CITY-ST-ZIP	LAKELAND, FL 00000		1.4 CITY-S	T-ZIP						
TITLE	SD	DELETE	2.1 TITLE					☐ Chan	ige [Addition
NAME	SWEAT, WILLIAM A JR		2.2 NAME	Ì						Ì
STREET ADDRE 3S 369 LK HOLLINGSWORTH DR			2.3 STREE	TADDRESS						ĺ
CITY-ST-ZIP LAKELAND, FL 00000			2. 4 CITY-5	5T-2IP						
TITLE	☐ OELETE		3.1 TITLE					Char	ige [Addition
NAME			3.2 NAME							
STREET ADDRE IS			3 3 STREET ADDRESS							
CITY-ST-ZIP	′-ST-ZIP		3.4. CITY-ST-ZIP							
TITLE	DELETE 4.1		4.1 TITLE		_			Char	nge [Addition
NAME			4 2 NAME							
STREET ADDRESS	8		4.3 STREE	TADDRESS						
CITY-ST-ZIP	<u> </u>		4.4 CITY-S	T-ZIP						
TITLE DE		☐ DELETE	5.1 TITLE					☐ Char	ige [Addition
NAME			5.2 NAME							
STREET ADDRESS	5		5.3 STREE	TADDRESS						
CITY-ST-ZIP	1		5 4 CITY-S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE	ļ				Char	nge [Addition
NAME			6.2 NAME							
PERFET ADDRESS	1									
STREET ADDRESS	6		6.3 STREE	T ADDRESS						

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 cortify 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 each; 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, with all other like empowered.

SIGNATURE:

Teller=

A. HERNANDER

4-12-99

(941)667-0150