PROFIT CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 JUL -6 AM 8:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 596663 (5)

1. Corporation Name

HOOPER INTERNATIONAL REALTY, INC.

Principal Place of Business	Mailing Address
4747 N OCEAN DRIVE STE 231 FORT LAUDERDALE FL 33308	4747 N OCEAN DRIVE STE 231 FORT LAUDERDALE FL 33308

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/07/1978
3a. Date of Last Report: 04/29/1994
4. FEI Number: 59-1865733 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. ☐ $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business / 2a. Mailing Address
21 / 26
Suite, Apt. #, etc. 22 / 27
City & State 23 / 28
Zip 24 County 25 / Zip 29 County 30

9. Name and Address of Current Registered Agent

MORAITIS, GEORGE R.
915 MIDDLE RIVER DR., #506
FT. LAUDERDALE FL 33304

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

12. OFFICERS AND DIRECTORS

	12.	13.
TITLE	PST	☐ Change ☐ Addition
NAME	HOOPER, ALAN C.	
STREET ADDRESS	4747 N. OCEAN DR. #217	
CITY-ST-ZIP	FORT LAUDERDALE, FL00000	
TITLE	D	☐ Change ☐ Addition
NAME	HOOPER, ALAN C.	
STREET ADDRESS	4747 N. OCEAN DR. #217	
CITY-ST-ZIP	FORT LAUDERDALE, FL00000	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/95)

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