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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 610020

1. Corporation Name

NATIONAL REALTY INVESTMENT GROUP, INC.

Principal Place of Business Mailing Address						I 1981(4 strat tiett 98th souly (felt Seit Steit Eibit state stott Sibit state jest jest		
97300 OVERSEAS HWY. 97300 OVERSEAS HWY.			WY.					
SUITE 1 SUITE 1						DO NOT WRITE IN THIS SPACE		
KEY LARGO FL 33037 KEY LARGO FL 33037		37			3. Date Incorporated or Qualifed			
1						02/15/1979		
2. Principal P	Place of Business	2a. Mailing Address	s			4. FEI Number Applied For		
21		26				NOT APPLICABLE Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, et	Suite, Apt. #, etc.			5. Certificate of Status Desired		
		27				F88 Required		
City & State		City & State			6. Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Zip	_	ıntry		8. This corporation owes the current year Intangible Personal Property Tax No		
24	25	29	30			Torona Tropolly Tox.		
	9. Name and Address of Curr	rent Registered Agent		81	\$1	10. Name and Address of New Registered Agent		
000	NNELL, PETER J	,		81	Name			
97300 OVERSEAS HWY #1				82	Street A	eet Address (P.O. Box Number is Not Acceptable)		
	LARGO FL 33037			L				
KET	LANGO FL 33037			83		,		
				84	City	85 Zip Code		
				1	′	FL ST SSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSSS		
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida	Statutes, the a	ibov	e-named o	corporation submits this statement for the purpose of changing its registered coration's board of directors. I hereby accept the appointment as registered		
office or r	registered agent, or both, in the Sta im familiar with, and accept the obl	igations of, Section 607.05	was authorized 05, Florida Staf	utes	trie corpo	polation's board of directors. Thereby accept the appointment as registered		
-	•	•						
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable.	(NOTE: Registerer	d Ager	nt signature re	required when reinstating) DATE		
12.	OFFICERS	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☐ DELI	ETE 1.1 TO	TLE		Change		
NAME	BLATE, BONNIE J.		1.2 N	AME	}			
STREET ADDRESS	- 665 NE-58 ST:		1.3 S	TREE	ADDRESS	97300 Overseas Hwy #1		
CITY-ST-ZIP	-MIAMI-FL		1.4 C	iTY-S	T-ZiP	47300 Overseas Hwy #1 Key Largo, FL 33037		
TITLE	VST	☐ DELI	ETE 2.1 T	TLE	7	☑ Change ☐ Addition		
NAME	O'CONNELL, PETER J.		2.2 N	AME				
STREET ADDRESS	665 NE 58 ST.		2.3 S	TREE1	T ADDRESS	97300 Overseas Huy #1		
CITY-ST-ZIP	MIAMI FL		2,40	CITY-9	ST-ZIP	Key Largo, FL 33037		
TITLE		☐ DELI	ETE 3.1 T	ITLE		☐ Change ☐ Addition		
NAME			3.2 N	AME				
STREET ADDRESS			338	TREE	TADDRESS	ì		
CITY-ST-ZIP								
TITLE			3.4. (T-ZIP			
NAME		☐ DELI		CITY-S	T-ZIP	☐ Change ☐ Addition		
		☐ DELI	ETE 4.1 TI	CITY-S	ST-ZIP			
STREET ADDRESS		☐ DELI	ETE 4.1 T	OITY-S ITLE NAME	TADDRESS	☐ Change ☐ Addition		
STREET ADDRESS		☐ peli	ETE 4.1 TI 4. 2 P 4.3 S	OITY-S ITLE NAME	TADDRESS	☐ Change ☐ Addition		
		DELI	ETE 4.1 TI 4.2 P 4.3 S 4.4 C	CITY-S ITLE VAME TREE	TADDRESS	☐ Change ☐ Addition		
STREET ADDRESS CITY-ST-ZIP TITLE			4.1 TI 4.2 P 4.3 S 4.4 C ETE 5.1 T	CITY-S ITLE VAME TREE	TADDRESS	☐ Change ☐ Addition		
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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 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP