

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

FILED
Mar 12 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 638103 (2)
1. Corporation Name
G.W. FOX REAL ESTATE, INC.

Principal Place of Business
5500 NORTHWEST 21ST TERRACE
~~BLDG NO 27 WEST OFFICE~~
FT. LAUDERDALE FL 33309

Mailing Address
5500 NORTHWEST 21ST TERRACE
BLDG NO 27 WEST OFFICE
FT. LAUDERDALE FL 33309



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5500 N.W. 21ST TERR Suite, Apt. #, etc.		2a. Mailing Address 26 91 N.E. 20 STREET Suite, Apt. #, etc.		3. Date Incorporated or Qualified 10/01/1979	
22 City & State 23 FT. LAUDERDALE FL.		27 City & State 28 FT. LAUDERDALE FL.		4. FEI Number 59-1941486 Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>	
24 33309 Country BROWARD		29 33305 Country BROWARD		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent FOX, GARY W 91 N E 20 STREET FT LAUDERDALE, FLA 33305		10. Name and Address of New Registered Agent		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
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.		81 Name		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
SIGNATURE		82 Street Address (P.O. Box Number is Not Acceptable)		83	
(NOTE: Registered Agent signature required when reinstating)		84 City		85 Zip Code	
DATE		FL			

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
STREET ADDRESS	STREET ADDRESS	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP
CITY-ST-ZIP	CITY-ST-ZIP	2.1 TITLE	2.2 NAME
		2.3 STREET ADDRESS	2.4 CITY-ST-ZIP
		3.1 TITLE	3.2 NAME
		3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
		4.1 TITLE	4.2 NAME
		4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
		5.1 TITLE	5.2 NAME
		5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
		6.1 TITLE	6.2 NAME
		6.3 STREET ADDRESS	6.4 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 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:  - GARY W. FOX - 3/4/98

CR2E034 (10/97)