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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 671644

(3)

INDIAN RIVER INVESTMENT REALTY, INC.

FILED
Jan 23 1998 8:00am
Secretary of State



1/12/10

Principal Place	of Business	Mailing Address			. Q1Q11 01Q14 01Q11 01Q11 1891	
4800 N A-1-A 4600 N A-1-A						
PENTHOUSE 10		PENTHOUSE 10		DO NOT MIDITE IN THIS SPACE		
VERO BCH FL 32963		VERO BCH FL 32963		3. Date Incorporated or Qualified	DO NOT WRITE IN THIS SPACE	
9 Principal Pla	ace of Business	2a. Mailing Address		05/29/1980 4. FEI Number	Applied For	
21 1805	- 194h place	26 1805- 194	4 pl.	59-2421679	Applied For Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.		_	\$8.75 Additional	
22 .5+4	2 100	27 Ste 100)	5. Certificate of Status Desired	Fee Required	
City & State	Λ .	City & State	, ,,	6. Election Campaign Financing	\$5.00 May Be	
23 Vero	beach, fl	28 Vero Be	acr, +1	Trust Fund Contribution	Added to Fees	
Zip 329	Country	Zip 2 2004	Country	8. This corporation owes or has paid the cu	rrentyear Intangible	
24 329	60 ₂₅ USA		o USA		Yes 🗌 No	
9. Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent						
NYQUIST, B. ANDERS B1 Name NYQUIST B. ANDERS						
4600 N. A-1-A, #510			82 Street A	ddress (P.O. Box Number is Not Acceptable)		
				05- 19 TH PL., STE	100	
			83 V	ERO BEACH, FL.		
			84 City		85 Zip Code	
FL 32960						
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 Mits, and accept the obligations of Section 607.0505, Florida Statutes.						
SIGNATURE Street and the street and						
12.	Signature, typed of printed name of registrired agent OFFICERS AND		Registered Agent signature r	equired when reinstating) DATE I ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	DVPS	DELETE	1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition	
NAME	NYQUIST, HARRIET		1.2 NAME			
STREET ADDRESS	4600 N A1A, PH 10		1.3 STREET ADDRESS			
CITY-ST-ZIP	VERO BCH FL		1.4 CITY-ST-ZIP			
TITLE	PTD	☐ DELETE	2.1 TITLE	PTD	Change	
NAME	NYQUIST, B. ANDRERS		2.2 NAME	NYOUST, B. ANDERS		
STREET ADDRESS	4600 NO A1A, PH-10		2.3 STREET ADDRESS	1805 - 19 TH PL. STE 100		
CITY-ST-ZIP	VERO BEACH FL		2. 4 CITY-ST-ZIP	NYOUIST, B. ANDERS 1805-19TH PL. STE 100 VERO BEACH FL. 32960	:	
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-\$1-ZIP		İ	
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETĒ	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			54 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition	
NAME			6.2 NAME	•		
STREET ADDRESS			6.3 STREET ADDRESS		}	
C(TY-ST-ZIP			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 eath; 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, open an attachment with an address.						