

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Feb 12, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # 830483**

1. Entity Name  
**NARCO REALTY INC**



Principal Place of Business  
**4415 FIFTH AVENUE  
PITTSBURG, PA 15213 US**

Mailing Address  
**4415 FIFTH AVENUE  
PITTSBURG, PA 15213 US**



01272004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**25-1235503**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**NUNES, RONALD M.  
7501 S. CYPRESSHEAD DRIVE  
PARKLAND, FL 33067**

**DO NOT WRITE  
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE NAME STREET ADDRESS CITY - ST - ZIP	VST BALSINGER, WILLIAM 4415 FIFTH AVE PITTSBURGH, PA 15213
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS CONNOR, DIANE G 4415 FIFTH AVE PITTSBURGH, PA 15213
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS MASON, MARTIN 4415 FIFTH AVE PITTSBURGH, PA 15213
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS KREUTZER, KAREN 4415 FIFTH AVE PITTSBURGH, PA 15213
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VAS BELLINO, KATHLEEN 4415 FIFTH AVENUE PITTSBURGH, PA
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP ALLEN, JAMES R 1001 3RD AVE., W SUITE 410 BRADENTON, FL 34205

00000049023  
02/13/04-80007-001 150.00

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IN THIS SPACE**

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** \_\_\_\_\_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*Kathleen Bellino* *Kathleen Bellino* 1/27/04 412-578-7828