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

**PROFIT** CORPORATION **ANNUAL REPORT** 

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

**FILED** 

Jan 29 1998 8:00am

Secretary of State

Change

Addition

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F67248

Mailing Address

ALL-PRO REALTY, INC.

CITY-ST-ZIP

STREET ADDRESS

Block 12 or Block 13 if changed, or on an attachment,

TITLE

NAME

Principal Place of Business 13860-8 WELLINGTON TRACE 13860-8 WELLINGTON TRACE W PALM BCH FL 33414 W PALM BOH FL 33414 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/15/1982 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 56-2167067 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution 23 28 Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 29 Yes □ No 24 25 30 Personal Property Tax due June 30. g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 GAMBLE, GEORGE JR. Name 2535 FOREST HILL BOULEVARD 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33414 83 84 City Zip Code bove-named corporation submits this statement for the purpose of changing its registered by the corporation's board of directors. I hereby accept the appointment as registered 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the office or registered agent, or both, in the State of Florida. Such change was author agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida 8 SIGNATURE Signature, typed or printed name of registered agent and title if applicable DATE ed Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. DELETE Change Addition TITLE TITLE **GAMBLE, GEORGE R JR.** 1. NAME NAME 2535 FOREST HILL BOULEVARD . 1 STREET ADDRESS 1.3 STREET ADDRESS WEST PALM BEACH FL 1.4 CHY-ST-ZIP CITY-ST-ZIP VPST DELETE ☐ Change Addition TITLE 2.1 TITLE GAMBLE, JEAN E. NAME 2.2 NAME 6900 WEST LAKE DR STREET ADDRESS 2.3 STREET ADDRESS WEST PALM BEACH FL 2.4 City-St-ZiP CITY-ST-ZIP TITLE DELETE 3.1 THILE ☐ Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP CITY-ST-7IP DELETE ☐ Change Addition TITLE 41 TITLE 4 2 NAME NAME STREET ADDRESS 4 3 STREET ADDRESS CITY-ST-ZIP 4 4 CITY-ST-ZIP ☐ DELETE Change \_\_\_ Addition 5.1 TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

5.4 CITY - ST - ZIP

6.4 CITY - ST - ZIP 14. Thereby 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 trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in

· AlvAnasi Inday

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

DELETE