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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # F93000002786 (2)

AMERICAN REALTY MANAGEMENT CORP. OF DELAWARE

13	75 W. HILLS	e of Business BORO BLVD. CH. FL 33442		ailing Address 375 W. HILLSBORO BLYD. EERFIELD BCH. FL 33442-1719				
<u> </u>							3. Date Incorporated or Qualified 3a. Date of Last Report 06/11/1993 02/20/1996	
2.	Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number Applied For	
			26	<u> </u>			39-1244726 Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				Certificate of Status Desired See Required Fee Required	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be	
23			Zip Country				Trust Fund Contribution Added to Fees	
_	Zip				Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
24		25 29 30 30 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.0 3.		[30]	Florida Statutes Yes No 10. Name and Address of New Registered Agent			
-	ANIF	DERSON, LARRY W			81	Name	10.	
		5 W. HILLSBORO BLVD.						
		RFIELD BCH, FL 33442		82 S		Street Add	dress (P.O. Box Number is Not Acceptable)	
	DCL	MILES BOTH TE GOTTE			63			
					84	City	FL 85 Zip Code	
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 regist 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 registragent. I am familiar with, and accept the obligations of Section 607,0505, Florida Statutes. SIGNATURE Signature, typed or profited name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12			ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
Till		CDP			TLE		Change Addition	
NAI	NAME BECKERS, RICHARD			1.2 N	1.2 NAME			
STREET ADDRESS CLAUDIUSSTRASSE 38, 4 DU			USSELLFORF-NORD	1.3 \$1	1.3 STREET ADDRESS			
CII	Y-ST-ZIP	GERMANY		1.4 C	ITY-S	ST - ZIP		
TIT	L.E	D	DELETE 2.1		2.1 TITLE		Change Addition	
NA	AME BECKERS, ILSE			2.2 N	2.2 NAME			
STREET ADDRESS CLAUDIUSSTRASSE 38, 4 DUSSELLFO			USSELLFORF-NORD	RD 2.3 STREET ADDRESS		ADDRESS		
	Y-ST-ZIP				2.4 City-St-ZiP			
Tit	LE	VP\$	☐ DELETE	3.1 Ti			Change Addition	
NA	ME	ANDERSON, LARRY W		3.2 N				
STREET ADDRESS 1375 W. HILLSBORO BLVD.				3.3 STREET ADORESS		' 1		
•	Y - ST - ZIP				3.4. City-st-zip		Change Addition	
TH					41 TITLE		L'I CIBURE L'I VOOING	
NAME BECKERS, GISBERT STREET ADDRESS CLAUDIUSSTRASSE 38, 4 DUSSELFORF-NORD			1	4 2 NAME 4.3 STREET ADDRESS				
	REET ADDRESS	GERMANY	OSSELFORI HORD				·	
CIT	Y-ST-7IP	OCUMANI	☐ DELETE	4.4 C	_	ST-ZIP	Change Addition	
NAI	Į			5.1 si				
l	ME REET ADORESS				_	T ADDRESS		
1	Y-ST-ZIP					ST-7IP		

SIGNATURE:

HILE NAME

STREET ADORESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

6.1 TITLE

6.2 NAME

14. I do 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 ranged, or or an attachment with an address.

6.3 STREET ADDRESS 6.4 CHY-ST-ZIP

FILED

Feb 12 1997 8:00am

Secretary of State

☐ Change

Addition