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 # F9400002975 (0)

MANCHI REALTY, INC.

FILED Jan 20 1998 8:00am Secretary of State



Principal Place of Business Mailing Address								111 19001 0111 1901	
116 CASSILLY WAY 116 CASSILLY WAY									
JUPITER FL 33458		JUPITER FL	JUPITER FL 33458			DO NOT WRITE	DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified			
						06/07/1994			
2. Principal P	lace of Business	2a. Mailing	2a. Mailing Address					Applied For	
21		26	26			34-1017114	34-1017114 Not Applic		
Sulte, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 ' '	75 Additional	
22		27				3. Optimizate of class 200.103	Fe	e Required	
City & State		 	City & State			6. Election Campaign Financing \$5.00 May Be			
23 Zin				Country		Trust Fund Contribution		ded to Fees	
Zip	<u> </u>	<u>├</u> ─┐ `		٠ .	,	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
24	25 29 30 30 9, Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
MA	NCHI, JAMES			81	Name		•		
	CASSILLY WAY		<u> </u>			(0.0 ft. N) - (1.1 ft	1-3		
	PITER FL 33458		82 Street Add			Address (P.O. Box Number is Not Acceptab	ile)		
JUPITER PC 33430				83					
							11	<u></u>	
				84	,		FLI	Zip Code	
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									
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 horeby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typeg or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.		ERS AND DIRECTORS	(NOIC. II	13.	en signature i	ADDITIONS/CHANGES TO OFFIC		CTORS IN 12	
TITLE	PD		DELETE	1.1 TITLE			☐ Cha		
NAME	MANCHI, JAMES	HI, JAMES 12h		1.2 NAME					
STREET ADDRESS	4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4		1.3 STREET	ADDRESS	Marie .				
CITY-ST-ZIP	JUPITER FL 33458	JUPITER FL 33458 140		1.4 CITY-5	ST-ZIP				
TITLE			DELETE	2.1 TITLE			☐ Cha	inge 🔲 Addition	
NAME		22		2.2 NAME					
STREET ADDRESS	STREET ADDRESS		2.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP			2.4 CITY-5		ST-ZIP				
TITLE			DELETE 31 TITLE				☐ Cha	inge 🔲 Addition	
NAME				3.2 NAME	ľ				
STREET ADDRESS				3.3 STREET	ADDRESS				
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TOTLE		L	_] DELETE	4.1 TITLE			Cha	inge L∐ Addition	
NAME			ļ	4. 2 NAME					
STREET ADDRESS				4.3 STREET					
CITY-ST-ZIP			DELETE	4.4 CITY - 9	ST - ZIP		☐ Cha	nge Addition	
TITLE		Ĺ	_ , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	5.1 THTLE 5.2 NAME			ال ال	mgo L Rounion	
NAME					ADDDCCC				
STREET ADDRESS				5.3 STREET				1	
CITY-ST-ZIP TITLE			DELETÉ	5.4 CITY - S 6.1 TITL€	31 - ZIP		☐ Cha	nge Addition	
NAME		_		6.2 NAME	-				
STREET ADDRESS				6.3 STREET	ADDRESS				
· .				6.4 CITY - S					
CITY-ST-ZIP		untie al suith thin tilung along	not muclify for t			d in Section 110 07/3/(i) Florida Statutos I	further earlifuthe	t the information	

4. 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 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 en an ethermont with an address.

1-3-90 511-7481708