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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP

SIGNATURE:

14. I do hereby certily that the information indicated on this serior is a notice of the control of the control



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 03 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # F9500000681 (5)

MISSION REAL ESTATE CORPORATION

Principal Plac 7947 YORKSH BOCA RATON		Malling Address 7947 YORKSHIRE COURT BOCA RATON FL 33496-1323					
						3. Date Incorporated or Qualified 02/09/1995	3a. Date of Last Report 01/25/1996
2. Principal F	lace of Business	2a. Mailing Addr	ess			4. FEI Number	Applied For
21		26	-1-			48-0809247	Not Applicable
Suite, Apt. #, etc.		Suite, Apt #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State				6. Election Campaign Financing	\$5.00 May Be
23		28				Trust Fund Contribution	Added to Fees
Zφ			Zip Country		This corporation has liability for intangible tax under s. 199.032,		
24	25	[29]	30	L			Yes No
	9. Name and Address of Curre	nt Registered Agent		81	Name	10. Name and Address of New I	Registered Agent
	IMELMAN, KURT				TVARTIE		
	7 YORKSHIRE COURT			82	Street Ad	dress (P.O. Box Number is Not Accept	able)
BO	CA RATON FL 33496			83			
				84	City		FL 85 Zip Code
office or agent 1 a SIGNATURE.	registered agent, or both, in the State im family:r with, and adcept the oblig	e of Florida. Such char gations of, Section 607.	ige was autho .0505, Florida 5 M. Ki	orized by Statutes MHE	the corpor	propration submits this statement for the atlon's board of directors. I hereby accurately the submit of the submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the atlones to be submit of the statement for the	ept the appointment as registered
12.	OFFICERS AN	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
Tille	PT	☐ DELETE		11 TITLE			Change Addition
NAME	RUDNICK, L. WILLIAM		1	1.2 NAME			
STEEF LADORESS	7947 YORKSHIRE COURT			1.3 STREET	.		
CITY-ST-ZIP	BOCA RATON FL 33496 VS DELETE		FIFTE	1.4 CITY-ST-ZIP 2.1 TITLE			Change Addition
NAME	RUDNICK, SAUNDRA			2.2 NAME			
STREET ADDRESS	7947 YORKSHIRE COURT			2.3 STREET	ADDRESS		
City - St - ZIP	BOCA RATON FL 33496			2. 4 CITY - S			
THLE		Dt	LETE	3.1 TITLE			Change Addition
NAME				3.2 NAME			
STREET ADDRESS			1	3.3 STREET			
CITY - ST - 7H2 TITLE		l pi	LETE	3.4. CITY - S 4.1 TITLE	51 - ZIP		☐ Change ☐ Addition
NAME		<u></u> 51	CCVL	4. 2 NAME	ì		
SERFET ADDRESS				4.3 STREET	ADDRESS		
CHTY - ST - ZIP			Į	4.4 CITY-S	ľ		
THE		□ D	ELETE	5.1 TITLE	·		Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY-ST-7/P				5.4 CITY-S	T_ 71P		
7 7 7					1-211		
T:TLE NAME	77711.141111	DI	ELETE	61 TITLE 62 NAME	1-20		Change Addition

64 City-St-ZiP

olied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that the receiver provided empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name