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PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F9600002172

1. Corporation Name

REAL 3 LUCKY LTD., INC.

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90064 003 ***150.00



Fillicipal Flac	ce of Business	Mailing Address				1 1001400 1110 101			HANK HANKE HAN HANK	
G/O APPLEBAL	UM	C/O APPLEBAUM								
80-83 GRENFELL STREET		80-83 GRENFELL STREET								
KEW GARDENS NY 11415		KEW GARDENS NY 11415			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed				٦	
1	•						or Qualifed			
2 Principal F	Place of Business	2a. Mailing Address				05/01/1996			T	
2. Principal Place of Business		⊢ •				4. FEI Number		_	Applied For	1 :-
Suite, Apt.	# ote	Suite, Apt. #, etc.				11-2673546		<u> </u>	Not Applicable	130
22	. #, etc.	⊢				5. Certifcate of Statu	s Desired		75 Additional e Required	
City & Star	to .	City & State	•						<u> </u>	1
23		28				6. Election Campaign Trust Fund Contril	- 1		00 May Be led to Fees	
Zip	Country	Zip	Cou	intry				-	jed to Fees	┨
24	25	— · -	30			8. This corporation of Personal Property	•	Intangible Yes	□No	
[24]	9. Name and Address of Current I		<u> </u>	T		10. Name and Addre				┨
	10000000000000000000000000000000000000			81	Name	10. Name and Addie	as or row registers	20 Agoin		1
KAP	LAN, DAVID]
4101 PINE TREE DR., STE 1425			82	Street Addre	dress (P.O. Box Number is Not Acceptable)					
MIAMI BEACH FL 33140						1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	(4. 14. 4.15) (4.15) (5.		1 199 3 1 1 1 1 2	1
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				84	City			85	Zip Code '	1
11 Pursuant	to the provisions of Sections 607.0502 a	and 607 1508 Florida Statutes	the a	hove-r	named corne	pratian submite this state	mont for the gurness	of changing	a ita ragistarad	}
office or i	registered agent, or both, in the State of im familiar with, and accept the obligation	Florida. Such change was aut	horized	by the	e corporatio	n's board of directors. I h	nereby accept the app	pointment a	s registered	
SIGNATURE										
40	Signature, typed or printed name of registered agent at			Agent si	ignature required	when reinstating)	DATE			<u>∞</u> '
12.	OFFICERS AND	·	13.			ADDITIONS/CHAN	GES TO OFFICERS	-		2
TITLE	P	☐ DELETE	1.1 Tf	ILE				Char	nge 🗌 Addition	= j
NAME										
	APPLEBAUM, MARILYN		1.2 NA							[\(\tilde{\tii
STREET ADDRESS	80-83 GRENFELL STREET			WE REET AD	DORESS					E034
CITY-ST-ZIP	80-83 GRENFELL STREET KEW GARDENS NY	- October	1.3 ST 1.4 СП	REET AL			ogan dingangan			:R2E034
CITY-ST-ZIP	80-83 GRENFELL STREET KEW GARDENS NY V	DELETE	1.3 ST 1.4 CD 2.1 TD	REET AL TY-ST-Z TLE				☐ Char	nge 🔲 Addition	CR2E034 (11/98)
CITY-ST-ZIP TITLE NAME	80-83 GRENFELL STREET KEW GARDENS NY V KAPLAN, IDIDA	DELETE	1.3 ST 1.4 СП	REET AL TY-ST-Z TLE				☐ Char	nge Addition	CR2E034
CITY-ST-ZIP	80-83 GRENFELL STREET KEW GARDENS NY V KAPLAN, IDIDA 19 GATEWAY DR	DELETE	1.3 ST 1.4 CF 2.1 TF 2.2 NA	REET AL TY-ST-Z TLE	SIP		,	☐ Char	nge Addition	CR2E034
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	80-83 GRENFELL STREET KEW GARDENS NY V KAPLAN, IDIDA 19 GATEWAY DR GREAT NECK NY 11021		1.3 ST 1.4 CD 2.1 TD 2.2 NA 2.3 ST 2.4 CD	REET AD TY-ST-Z TLE ME REET AD TY-ST-Z	DORESS .					CR2E034
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CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	80-83 GRENFELL STREET KEW GARDENS NY V KAPLAN, IDIDA 19 GATEWAY DR GREAT NECK NY 11021 S GREENBAUM, FERN 218 BROADWAY LAWRENCE NY T	☐ DELETE	1.3 ST 1.4 CF 2.1 TF 2.2 NA 2.3 ST 2.4 CF 3.1 TF 3.2 NA 3.3 ST 3.4 CF 4.1 TF 4.2 NA	REET ALL TY-ST-Z TLE REET ALL TY-ST-Z TLE ME REET ALL TY-ST-Z TLE TY-ST-Z TLE TY-ST-Z	DORESS ZIP			☐ Chan	ige ∏Addition	CR2E034
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14. 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 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 on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

