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

**PROFIT** CORPORATION ANNUAL REPORT 1998 DOCUMENT #



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

(4)

CENTURY REALTY & INVESTMENT CO., INC.

Principal Place	of Business	Mailing Address				41211 A1211 A1211 A1211 A211			
POST OFFICE	BOX 70185	2631 E OAKLAND PARK BLI POST OFFICE BOX 70185 FT. LAUDERDALE FL 333064			DO NOT WRITE IN THIS	SPACE			
2631 E OAKLAND PARK BLVD. POST OFFICE BOX 70185 POST OFFICE BOX 70185 POST OFFICE B FT. LAUDERDALE FL 33306-0185 US  2. Principal Place of Business 2. Principal Place of Business 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. Country 2. Zip 2. Country 2. Zip 2. Country 2. Zip 2. Country 2. Reme and Address of Current Registered Agent DE CAMP, IRENE					3. Date Incorporated or Qualified 04/11/1983				
2. Principal Pla	ce of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For			
21		26			NOT APPLICABLE	Not Applicable			
	, etc.	Suite, Apt. #, etc.			6. Certificate of Status Desired	\$8.75 Additional Fee Required			
`		<b>├</b> ─Ŋ '			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip	Country	,	8. This corporation owes or has paid the cur	rent year Intangible			
24			]			Yes No			
9, Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
				Name					
4325 NE 22 AVE. FT LAUDERDALE FL 33308-5661		1	82	Street Addr	Street Address (P.O. Box Number is Not Acceptable)				
				3					
			84	City	Fi	85 Zip Code			

SIGNATURE	Signature, typed or printed name of registered agent and title if applica	tile (NOTE I	Registered Agent signature r	equired when reinstating)	DATE	
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO	OFFICERS AND DIRECTOR	S IN 12
TITLE	DP .	DELETE	1.1 TITLE		☐ Change	Additio
AME	DE CAMP, IRENE		1.2 NAME			
TREET ADDRESS	4325 NE 22 AVE		1.3 STREET ADDRESS			
ITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY-ST-ZIP			
TLE		DELETE	2.1 TITLE		Change	Additio
AME )			2.2 NAME			
TREET ADDRESS			2.3 STREET ADDRESS			
ITY-ST-ZIP			2.4 CITY+ST-ZIP			
TLE		☐ DELETE	3.1 TITLE		Change	Additio
AME			3.2 NAME			
TREET ADDRESS			3.3 STREET ADDRESS			
TY-ST-ZIP			3.4. CITY - ST - ZIP			
TLE		☐ DELETE	4.1 TITLE		Change	☐ Additio
WE			4. 2 NAME			
TREET ADDRESS			4.3 STREET ADDRESS			
TY-ST-ZIP			4.4 CITY-S1-ZIP			
TLE		DELETE	5.1 TITLE		☐ Change	Additio
AME			5.2 NAME			
TREET ADDRESS			5.3 STREET ADDRESS			
rty-st-zip			5.4 CITY-ST-ZIP			
71.5		DELETE	CA TIVE		Change	Additio

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 on whe recovier or furselese empowered to execute this report as required by Chapter 60Z, Florida Statutes; and that my appears in Block 13 if changed, or of a land address.

6.3 STREET ADDRESS

SIGNATURE:

NAME STREET ADDRESS

**FILED** 

May 12 1998 8:00am

Secretary of State