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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # G63974

(1)

Mailing Address PO BOX 16866

PLANTATION FL 33318-6866

REAL-WAY FINANCIAL CORP.

FILED
Jun 10 1997 8:00am
Secretary of State

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Pr. LAVD 33313						3. Date Incorporated or Qualified 10/06/1983 3a. Date of Last Report 05/01/1996					
. Principal Place of Business		— —	2a. Mailing Address			4. FEI Number			Applied For		
1	-1-		26					59-2334690			ot Applicab
Sulte, Apt. #, etc.		27				5. Certificate of Status Desired		\$8.75 Additional Fee Required			
City & State			L 0	ity & State				6. Election Campaign Financing		\$5.00	May Be
			28	 				Trust Fund Contribution		Added	to Fees
Zip	— ·			Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
4 25 29 9. Name and Address of Current Registered Agent					30			. - 	Yes _		
DI IDI			on nogiste	ed Agent	В	1 Nan		10. Name and Address of New R	egistered A	rgent	
RUBIN, BARRY I SECTION 1 SANCTION OF THE STATE OF THE ST						, Tall					
					8	Street Address (P.O. Box Number is Not Acceptable)					
FLAN	IIMIIUN FI	- 000 10 A			8	3					
two		_				1					
•					8	4 City			FL	85 Zip	Code
1. Pursuant to	the provision	ns of Sections 607 (1502 and 607	1508 Florida Stati	iles the abo	ve-nem	od corn	oration submits this statement for the		obasaisa i	to register
office or reg	gistered age	int, or both, in the St	alo of Florida.	Such change was	: authorized I	ov the c	orporati	on's board of directors. I hereby acce	ept the appo	ontment as	registered
-	rationiat Will	n, and accept the ob	aganons or, S	еспоп ос7.0505, Е	nonda Statuli	#S.					
IGNÁTURE _	gnature, typed o	r printed name of registered	agent and title if A	pplicable (NO	OTE: Registered A	gont signs	ure require	od when reinsteting)	DATE	·	
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Information	indicated or per or direct	i this annual report c	r supplement or the receive	al annual report is or or trustee empoy	true and acc wered to exe	urato a	rd thal r	in Section 119.07(3)(i), Fiorida Statute my signature shall have the same leg as required by Chapter 607, Florida s	al Affact ac	t made un	dor onthe t