

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

FILED

**May 11 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **G64859 (3)**
1. Corporation Name
MEARS REALTY AND INVESTMENTS, INC.



DO NOT WRITE IN THIS SPACE

Principal Place of Business
**10100 W. SAMPLE RD.
SUITE 103
CORAL SPRINGS FL 33065-LPRI
US**

Mailing Address
**P O BOXZ 934069
MARGATE FL 33093
US**

3. Date Incorporated or Qualified
10/12/1983

2. Principal Place of Business
21 **10744 NW 8 Ct**
Suite, Apt. #, etc.
22
City & State
23 **Coral Springs FL**
Zip Country
24 **33071** 25 Country
26
City & State
27
Zip Country
28
29
30

4. FEI Number
59-2346872

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**PULS, WAYNE
10100 W. SAMPLE RD
SUITE 103
CORAL SPRINGS FL 33065**

10. Name and Address of New Registered Agent
81 Name **Phyllis Mears**
82 Street Address (P.O. Box Number is Not Acceptable)
10744 NW 8 Ct
83
84 City **Coral Springs FL** 85 Zip Code **33071**

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 hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Phyllis S. Mears* **Phyllis S. Mears** **4-27-98**
Signature typed or printed name of registered agent and date it applies to (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PULS, WAYNE	1.2 NAME	
STREET ADDRESS	10100 W SAMPLE RD SUITE 103	1.3 STREET ADDRESS	10744 NW 8 Ct
CITY-ST-ZIP	CORAL SPRINGS FL	1.4 CITY-ST-ZIP	Coral Springs, FL 33071
TITLE	PS <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEARS, PHYLLIS S	2.2 NAME	
STREET ADDRESS	10100 W. SAMPLE RD., STE. 103-B	2.3 STREET ADDRESS	10744 NW 8 Ct
CITY-ST-ZIP	CORAL SPRINGS FL 33065	2.4 CITY-ST-ZIP	Coral Springs, FL 33071
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE *Phyllis S. Mears* **Phyllis S. Mears** **4-17-98** **954-341-9261**

CR2E034 (10/97)