FILED Apr 22, 1999 8:00 am Secretary of State

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

DOCU	MENT # G64859						
<ol> <li>Corporation</li> </ol>	REALTY AND INVESTMENT						
MILAIO	ILMLI MIND INVECTION	o, 1140·			A KARANT BATA ANUT ATERA TATAL ANUT TERA		AIN RIRU HEDI
Principal Place of Business Mailing Address					1 100/11/ 00/1 #1/11 G1001 (G10) G1/10 10/11 G101	1 E1851 E1811 #1811 E1	Alt 51631 1881
10744 NW 8 CT		P O BOXZ 934069					
SUITE 103		MARGATE FL 33093			DO NOT WRITE IN TH	IS SPACE	
CORAL SPRINGS FL 33071 US US				3. Date Incorporated or Qualifed			-
03					10/12/1983		
2. Principal Place of Business 2a. Mailing Addre					4. FEI Number	App	olied For
21		26		59-2346872	Not	Applicable	
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.	ite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A	
22	27	<del></del>		O. Goldman and a second a second and a second a second and a second a second and a second and a second and a	Fee Rec	`	
City & State City & State					6. Election Campaign Financing	\$5.00	
23 28			Country		Trust Fund Contribution Added to Fees  8. This corporation owes the current year Intangible		
Zip				у	Personal Property Tax.	∏Yes }	M/No
24	9. Name and Address of Curren	<u> </u>	30		10. Name and Address of New Registere		
	3. Name and Address of Carre		8-	1 Name			
	rs, Phyllis		82	2 Street Add	ress (P.O. Box Number is Not Acceptable)		
10744 NW 8 CT			"	Subbi Add	TIESS (F.O. BOX Number to Not / Goop above)		
SUITI		8:	3				
CORAL SPRINGS FL 33071			84	4 City		. 85 Zip C	ode
		1	1	'		L	
11. Pursuant t	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute	es, the about	ve-named corporati	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its reconntment as rec	registered ristered
office or re agent. I ar	egistered agent, or both, in the State in familiar with, and accept the obliga	tions of, Section 607.0505, Flor	rida Statute	s.	ion's board of directors. Thereby assept the spy		,
SIGNATURE							
··	Signature, typed or printed name of registered age		Registered Age	ent signature requin	ed when reinstating)  ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	RS IN 12
12.			1.1 TITLE		ADDITIONS/CITATOLO TO CITACE	☐ Change	Addition
NAME	D Puls, wayne	121					
STREET ADDRESS.				ET ADDRESS			
CITY-ST-ZIP	22-11 23-11-12		1.4 CITY-				
TITLE	PS	Ŭ DELETE	2.1 TITLE			Change	Addition
NAME	MEARS, PHYLLIS S		2.2 NAME	:			
STREET ADORESS	10744 NW 8 CT		2.3 STRE	ET ADDRESS			•
CITY-ST-ZIP	CORAL SPRINGS FL 33071	-	. 2.4 CITY	-ST-ZIP	·	<u> </u>	
TITLE	4444	☐ DELETE	3.1 TTLE			Change	☐ Addition
NAME			3.2 NAME	<u> </u>			
STREET ADDRESS			3.3 STRE	ET ADDRESS			
CITY-ST-ZIP			3.4. CITY			[] Change	Addition
TITLE		☐ DELETE	4.1 TITLE			Change	☐ Addition
NAME *			4. 2 NAM				
STREET ADDRESS		,		ET ADDRESS			Ì
CITY-ST-ZIP			4.4 CITY-		100	☐ Change	Addition
TITLE			5.1 TITLE 5.2 NAME	i		_ *	
NAME				ET ADDRESS			ł
STREET ADDRESS			5.4 CITY-				,
CITY-ST-ZIP		☐ DELETE	6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME	<u>.                                    </u>	•		
NAME CONTEST ADDRESS			6.3 STRE	ET ADDRESS			

CITY-ST-ZIP 14. 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 of 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:

STREET ADDRESS

954-34-9061