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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

DOLPHIN REALTY AND MORTGAGE CORP.

FILED								
May 04 1998 8:00am								
Secretary of State								

Principal Plac	e of Business	Mailing Address				- I IBRETITI MARI TADIH MAHIN ERIOR TEMBR TEMBR TEMI DA	idain Bhein Greil Gheil Ai	ON DIEKI HERI
728 LINCOLN AVE 728 LINCOLN AVE								
SUITE 1 SUITE 1 SUITE 1 MELBOURNE FL 32901 MELBOURNE FL 32901						DO NOT WRITE IN THIS SPACE		
		WEEDOO!!!! 1 E 1200/				3. Date Incorporated or Qualified		
						11/17/1983		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	Á	pplied For
21	26				59-2344766	N	ot Applicable	
Suite, Apt. #, etc Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75	Additional
22 27						5. Octimicate of States Desired	Fee R	equired
City & State	City & State	s State			6. Election Campaign Financing		May Be	
23	T 2		28			Trust Fund Contribution		to Fees
	Zip Country Zip		_	Country		8. This corporation owes or has paid the		
24	25 9. Name and Address of Curren	29	30			Personal Property Tax due June 30. 10. Name and Address of New Regist		No
		ir vedistoren wägir		81	Name	10. Name and Address of New Regist	ereu Agent	
	ENGERT, MARK		L					
	8 LINCOLN AVE JITE 1			82	Street Addre	ss (P.O. Box Number is Not Acceptable)		
	ELBOURNE FL 32901		-	83				
1 1995	SLOOUNNE PL 32901			٦				
			Ţ	64	City		FL 85 Zip	Code
11. Pursuant	the provisions of Sections 607 050	2 and 607 1508. Florida Statu	tes the ah	OV6-1	named corno	ration submits this statement for the num	CL	to conjetorod
office or re	egistered agent, or both, in the State	of Florida. Such change was	authorized	by ti	he corporation	ration submits this statement for the purpin's board of directors. I hereby accept the	e appointment as	registered
	m ramiliar with, and accept the obliga	ations of, Section 607.0505, F	orida Statu	nes.				
SIGNATURE	Signature, typed or printed name of registered age	ed and title if applicable (NO	TE Begistered	Acent	signatura reguirer	when reinstating)	DATE	
12.	OFFICERS ANI		13.		o grand radama	ADDITIONS/CHANGES TO OFFICERS		RS IN 12
TITLE	P	☐ DELETE	1.1 T(T)	LE			Change	Addition
NAME	WENGERT, MARK		1.2 NAF	ME	İ			
STREET ADDRESS	AARA ALAGOLESIII AID		1.3 STF	1.3 STREET ADDRESS				
CITY-ST-ZIP	APP BOURNE EI		1.4 CIT	1.4 CITY-ST-ZIP				
TITLE	V	☐ DELETE	2.1 TITI	LE			Change	Addition
NAME	WENGERT, ROBIN 221		2.2 NA	ME				
STREET ADDRESS	2009 ANDIRONDACK CIR		2.3 STP	2.3 STREET ADDRESS				
CITY-ST-ZIP	MELBOURNE FL		2.4 CIT	Y-ST-	ZIP			
TITLE		☐ DELETE	3.1 7171		1		☐ Change	Addition
NAME			32 NA)	ME				
STREET ADDRESS			3 3 STR	EET AD	ODRESS			
CITY-ST-ZIP			3 4. CiT	Y-ST-	ZIP			
TITLE		☐ DELETE	4 1 TITU	.Ē		-	Change	☐ Addition
NAME			4. 2 NA	ME				
STREET ADDRESS			4.3 STR	EET AD	DRESS			
CITY-ST-ZIP			4.4 CIT		ZIP			
TITLE		DELETE	5.1 TITL				☐ Change	Addition
NAME			5.2 NAA					
STREET ADDRESS			5.3 STR	EET AD	DRESS			
CITY-ST-ZIP		——————————————————————————————————————	5.4 CIT		ZIP			
TITLE		☐ DELETE	6.1 T(T)				Change	☐ Addition
NAME			6.2 NAA					
STREET ADDRESS			6.3 STR	EET AD	DRESS			
CITY-ST-ZIP	artify that the information curryled wi	0.0:-4:	6.4 CITY	/-ST-Z	ZIP C			

r nereby 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 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 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 Block 12 or Block 13 if changed, or on an exachment with an address