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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

11 OGS POTORIGI	MENT # H43001 VERDE REALTY SERVICES,	` '			BIBN BIBN 4180 BIBN 8180 BIBN 1180 BIBN
Principal Place of Business Mailing Address					
150-2C PINELLAS BAYWAY. STE 208 TIERRA VERDE FL 33715		150-2C PINELLAS BAYWAY. STE 208 TIERRA VERDE FL 33715			
				 Date incorporated or Qualified 02/15/1985 	3a. Date of Last Report 05/01/1996
	lace of Business	2a. Mailing Address		4. FEI Number 59-2495850	Applied For Not Applicable
Suite, Apt	#. etc.	Suite, Apt #, etc.			\$9.75 Addisons
22		27		Certificate of Status Desired	Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	T 01-	Trust Fund Contribution	Added to Fees
Zip 24	Country	Zιρ	Country	This corporation has liability for Florida Statutes	Intangible tax under s. 199.032, Yes No
24	9. Name and Address of Current	29 Registered Agent	30	10. Name and Address of New Re	
150- SUIT TIEF	LAHAN, HERBERT S. 2C PINELLAS BAYWAY, STE 208 RA VERDE FL 33715		83 84 City	dress (P.O. Box Number is Not Acceptab	FL 85 Zip Code
office or r agent. La SIGNATURE	registered agent, or both, in the State rm familiar with, and accept the obligation Signature typed or printed name of registered age		authorized by the corpora Florida Statutes. OTE Registered Agent signature requ	rporation submits this statement for the pation's board of directors. I hereby acceptived when reinstating)	ot the appointment as registered
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
1/1),E	PVS	☐ DELETE	1.1 TITLE		Change Addition
NAME	Callahan, Herbert S. 150-20 Pinellas Bayway		12 NAME		}
STHEET ACCORESS	TIERRA VERDE FL		1.3 STREET ADDRESS		Į.
CITY - ST - ZIP	TD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE		Change Addition
NAME	CALLAHAN, HERBERT S.	_ occent	2.2 NAME		C creating C Macrison
STREET ADDRESS	150-2C PINELLAS BAYWAY		2.3 STREET ADDRESS		
City ST-ZiP	TIERRA VERDE FL		2. 4 CITY - ST - ZIP		
Title		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		ľ
STREET ADDRESS			3.3 STREET ADDRESS		
Chy-St-76			3.4. CITY-SY-ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME		FT STEEL	5.1 NILE 5.2 NAME		First custoffe Ti Variation!
STREET ADDRESS			5.3 STREET ADDRESS		
CHTY - ST - ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTO

Date Dayline Phone #

FILED

May 07 1997 8:00am

Secretary of State