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PROFIT CORPORATION ANNUAL REPORT

1998

REALCORP EQUITIES GROUP, INC.

DOCUMENT #



H60942

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

(0)

## FILED Apr 21 1998 8:00am Secretary of State



| -1497 FOREST HILL BLVD.        |  | 4497 FOREST HILL BLVD.                                 |                                 | İ                      |   |                  |                |
|--------------------------------|--|--|---------------------------------|------------------------|---|------------------|----------------|
| WEST PALM BEACH FL 33406<br>US |  | WEST PALM BEACH FL 33406<br>US                         |                                 |                        | DO NOT WRITE IN TH  | IIS SPACE        |                |
|                                |  |  |                                 | ;                      | 3. Date Incorporated or Qualified 06/05/1985  |                  |                |
|                                | Place of Business                                      | 2a. Mailing Address                                    |                                 |                        | 4. FEI Number   | TA               | pplied For     |
| 21 1495 Forest Hill Blvd.      |  | [26] 1495 Forest Hill Blvd.                            |                                 | d.                     | 59-2548840  |                  | ot Applicable  |
| Suite, Apt. #, etc.            |  | Suite, Apt. #, etc.                                    |                                 |                        | 5. Certificate of Status Desired  | \$8.75           | Additional     |
| 22 Suite A                     |  | 27 Suite A   |                                 |                        | 5. Certificate of status desired  | Fee R            | equired        |
| City & State                   |  | City & State   |                                 |                        | Election Campaign Financing   | \$5.00           | May Be         |
| 23                             | <del></del>  | 28   | ,                               |                        | Trust Fund Contribution   | Added            | to Fees        |
| Zip                            | Country  | Ζφ<br>(333)  | Country                         |                        | 8. This corporation owes or has paid the  |                  | ` ` I          |
| 24                             | 25  <br>9, Name and Address of Current                 | 29 <br> Registered Agent                               | 30                              |                        | Personal Property Tax due June 30.  O. Name and Address of New Register                 |                  | _l No          |
|                                |  | Hedisteren Adeist                                      | 81 N                            | <u>1</u><br>ame        | U. Name and Address of New Register   | eo Agent         |                |
|                                | ARP, MICHAEL T.  |  |                                 |                        |   |                  |                |
| SU                             | 97 FOREST HILL BLVD<br>H <del>TE G</del>               |  |                                 | reet Address<br>1495 F | (P.O. Box Number is Not Acceptable) 'orest Hill Blvd.                                   |                  |                |
| WE WE                          | EST PALM BEACH FL 33406                                |  | 83                              | Suite                  | Δ   |                  |                |
|                                |  |  | <b>84</b> Ci                    |                        |   | <b>85</b> Zip    | Code           |
| 11. Pursuant                   | to the provision of Sections 607.0502                  | and 607.1508, Florida Stat                             | tutes, the above na             | med corporal           | tion submits this statement for the purpos  | se of changing i | its reaistered |
| office or r                    | registern I agent, Whith, in the State of              | of Horida, Such change wa<br>tions of Scotion 607,0505 | s authorized by the             | corporation's          | tion submits this statement for the purpos<br>s board of directors. I hereby accept the | appointment as   | registered     |
|                                | XX 7 ( )   | 10 CH  | MB/ T CA                        | 0-0                    | 177   | MASV             |                |
| SIGNATURE                      | Signature, tyruddi i muli filmir of requition if agien | Land the it applicable (N                              | IOTE Brigistered Agent a g      | matur required wh      | hen reinstating) DAT  | 141 Us           |                |
| 12.                            | FFICERS AND  | DIRECTORS  | 13.                             |                        | ADDITIONS/CHANGES TO OFFICERS   | AND DIRECTOR     | RS IN 12       |
| TITLE                          | P  | DELETE   | 1.1 TITLE                       |                        |   | Change           | Addition       |
| NAME                           | CARP, MICHELE  |  | 1,2 NAME                        |                        |   |                  |                |
| STREET ADDRESS                 | 1497 FOREST HILL BLVD. SUI                             | TE G   | 1.3 STREET ADDE                 | RESS                   |   |                  |                |
| CITY-ST-ZIP                    | WEST PALM BEACH FL                                     |  | 1.4 CITY - S1 - ZIP             |                        |   |                  |                |
| TITLE                          | STD  | DELETE   | 2.1 1/1LF                       |                        |   | ☐ Change         | Addition       |
| NAME                           | KENNEDY, FRANCINE                                      | TE 0   | 2.2 NAME                        |                        |   |                  | -              |
| STREET ADDRESS                 | 1497 FOREST HILL BLVD. SUI                             | IE G.  | 2.3 STREET ADDR                 | RESS                   |   |                  |                |
| CITY-ST-ZIP                    | WEST PALM BEACH FL                                     |  | 2. 4 CITY-ST-7IF                | P                      |   |                  |                |
| TITLE                          | D PENNEDY THOMAS E                                     | ☐ OFCETE   | 3.1 TITLE                       |                        |   | ☐ Change         | Addition       |
| NAME<br>CTOSET ADDRESS         | KENNEDY, THOMAS F.<br>  1497 FOREST HILL BLVD. SUI     | TE G   | 3.2 NAM(                        | ut co                  |   |                  |                |
| STREET ADDRESS                 | WEST PALM BEACH FL                                     | il V   | 3.3 STREET ADDR                 |                        |   |                  |                |
| CITY-ST-ZIP<br>TITLE           | D O  | DELETE   | 3.4. CITY-S1 - ZIF<br>4.1 TITLE |                        |   | Change           | Addition       |
| NAME                           | CARP, MICHAEL T.                                       | F 20 20 20 11  | 4.2 NAME                        |                        |   | orango           |                |
| STREET ADDRESS                 | 1497 FOREST HILL BLVD. SUI                             | TE G   | 4 3 STREET ADDR                 | ESS                    |   |                  |                |
| CITY-ST-ZIP                    | WEST PALM BEACH FL                                     | · - •  | 4.4 CITY-ST-ZIP                 |                        |   |                  |                |
| TITLE                          |  | DELETE   | 5 1 1ITLE                       |                        | ***************************************   | Change           | Addition       |
| NAME                           |  |  | 5.2 NAME                        |                        |   | •                |                |
| STREET ADDRESS                 |  |  | 5.3 STREET ADDR                 | KISS                   |   |                  |                |
| CITY-ST-ZIP                    |  |  | 5.4 CitY - ST - ZIP             |                        |   |                  | ļ              |
| TITLE                          | -  | DELFTE   | 6.1 TriLif                      |                        |   | Change           | ☐ Addition     |
| NAME                           |  |  | 6.2 NAME                        |                        |   |                  | Ì              |
| STREET ADDRESS                 |  |  | 6.3 STREET ADDR                 | RESS                   |   |                  |                |
| CITY-ST-ZIP                    |  |  | 6.4 C(1Y - \$1 - Z(P            |                        |   |                  |                |

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 fr 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 provided empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change I as a provided with an address.

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