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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H63611

(8)

ALL FLORIDA REALTY, INC.

FILED Apr 03 1997 8:00am Secretary of State



Principal Prace of Business 9 \$ HAUFAX AVE	Mailing Address 9 \$ HALIFAX AVE			1 (\$200) 6110 61100 1110 61101 11001 11001 1210 6161 6161			
P.O. BOX 5084 DAYTONA BEACH FL 32126-5084	P.O. BOX 5084						
US	US		3. Date Incorporated or Qualified 06/25/1985	od 3a. Date of Last Report 03/22/1996			
2. Principal Place of Business	2a. Mailing Address			4. FEI Number		Ar	plied For
21	26			59-2567215		1	t Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 Fee Re	Additional equired
City & State	City & State			6. Election Campaign Financing		\$5.00	May Be
23	28			Trust Fund Contribution			to Fees
Zip Country	Zip	Country	/	8. This corporation has liability for i			199.032,
24 25	29	30			Yes N		
	f Current Registered Agent		T	10. Name and Address of New Re	gistered Age	nt	
troisi, kenneth p.		81	Name				
9 S. HALIFAX AVE. DAYTONA BEACH FL 32018		82	82 Street Address (P.O. Box Number is Not Acceptable		ie)		
Diff Total Denotifie decid		83					
		84	City		8	5 Zip	Code
11. Pursuant to the provisions of Sections office or registered agent, or both, in the			<u> </u>		<u>FL</u>		
The second of th	getered agent and title 1 approable (f) ERS AND DIRECTORS DELETE	13.	enl signature req	ية ied when reinstating) ADDITIONS/CHANGES TO OFFIC		RECTOF	RS IN 12
NAME PSI ROISI KENNETH P	L_ DETERIE	1.1 TITLE 1.2 NAME			<u></u>	Change	CT Addition
STEST ADDRESS 9 S. HALIFAX AVE.		4	T ADDRESS				
CHT- ST ZIP DAYTONA BEACH FL		1.4 CITY-					
THE	DELETE	2.1 TITLE	o, 1"			Change	Addition
NAM!		2.2 NAME)				
SIBLET ADDRESS			T ADDRESS				
CHY SI-ZIP		2 4 CITY-	1				
Wife	DELETE	3 1 TITLE				Change	Addition
NAME		32 NAME)				
STREET ADDRESS		3 3 STREE	T ADDRESS				
CHY+S1-ZiP		3 4. CITY -	S1-ZIP				
ППЕТ	☐ DELETE	4.1 TITLE				Change	Add tion
NAME		4. 2 NAME					
STEEL! ALORESS		4.3 STREE	T ADDRESS				
CITY- \$3 - 76°		4.4 CITY-	ST-ZIP				
1016	DELETE	5.1 TITLE				Change	Addition
NCME .		5.2 NAME					
STREET ADDRESS		5.3 STREE	1 ADDRESS				
CHY+S1+200		5.4 CITY-					
TILE	DELETE	6 1 TITLE				Change	Addition
NAME		62 NAME					
STREET ADDRESS		6 3 STREE	T ADDRÉSS				
CITY ST Zie		6.4 CITY -	ST-ZIP				

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 legat 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:

TURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

March 28/987 984-2625254