

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -6 AM 11:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H93905

(8)

1. Corporation Name

INTERNATIONAL REALTY, INC.

Principal Place of Business

6500 MARINER SANDS DRIVE
STUART FL 34992

Mailing Address

6500 MARINER SANDS DRIVE
STUART FL 34992

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 01/14/1986
3a. Date of Last Report 04/27/1994

4. FEI Number 59-2629823
Applied For Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21 3174 SW MARTIN DOWNS BLVD
Suite, Apt. #, etc.

2a. Mailing Address

26 3174 SW MARTIN DOWNS BLVD
Suite, Apt. #, etc.

City & State

23 Palm City, FL

City & State

28 Palm City, FL

24 34990 25 USA

29 34990 30 USA

9. Name and Address of Current Registered Agent

MAINS, GERALD L.
62 S. RIVER RD.
STUART FL 33494

10. Name and Address of New Registered Agent

B1 Name GERALD L. MAINS
B2 Street Address (P.O. Box Number is Not Acceptable) 624 ST. LUCIE CRESCENT, Apt 101
B3 City
B4 City STUART FL
B5 Zip Code 34994

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0504, Florida Statutes.

SIGNATURE *[Signature]*
Signature typed: Printed name of registered agent and title if not state.

(NOTE: Registered Agent Signature required when registering)

2-28-95
DATE

12. OFFICERS AND DIRECTORS

TITLE PVS
NAME MAINS, GERALD L.
STREET ADDRESS 62 S. RIVER ROAD
CITY-ST-ZIP STUART FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PVS ☒ Change ☐ Addition
1.2 NAME MAINS, GERALD L.
1.3 STREET ADDRESS 624 ST LUCIE CRESCENT, Apt #101
1.4 CITY-ST-ZIP STUART, FL 34994

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(b), 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]*
Signature typed: Printed name of signing officer or director

2-28-95
DATE

System 1/2/95