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ELORIDA DEPARTMENT OF STATE

PROFIT

SIGNATURE:

CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State DIVISION OF CORPORATIONS 1998 **DOCUMENT #** (0)H95499 USDAN REALTY, INC. Principal Place of Business Mailing Address ЬK 312 501751 750 SE 3RD AVENUE 7801 REDWOOD LANE FT. LAUDERDALE FL 33316 Fd. L-curleda PARKLAND FL 33067 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 01/23/1986 4. FEI Number 2. Principal Place of Business 2s. Mailing Address Applied For 59-2632476 26 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible Yes 25 20 Personal Property Tax due June 30. 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent USDAN, VIKKI 7901 REDWOOD LN 82 Street Address (P.O. Box Number is Not Acceptable) PARKLAND FL 33067 83 64 Accions 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered both, in the state of honda. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered diaccept the obligations of, Section 607,0505, Florida Statutes. office or registered agent. I am family (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change Addition TITLE 1.1 TITLE USDAN, VIKKI NAME 12 NAME 7901 REDWOOD LN STREET ADDRESS 1.3 STREET ADDRESS PARKLAND FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE TITLE 2.1 TITLE Change NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DEFFIE 3 1 TITLE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZIP 34. CITY-ST-ZIP DELFTE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 44 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS **53 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 6.1 TITLE Change NAME 62 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. Thereby 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 superior or director of the corporation or the superior or director of the corporation of the superior or director of the superior or director or director of the superior of the s

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