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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # J30052

1. Corporation Name

Principal Place of Business	Mailing Address	
3500 SW 121 AVE DAVIE FL 33330 US	3500 SW 121 AVE DAVIE FL 33330 US	

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90046 008 ***150.00

	MORTGAGE & REALTY C	O., INC.													
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23		28					<u> </u>	Trust Fund	Contribu	tion			Add	ed to	Fees
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24	25	29		30				Personal Pr					☐ Yes		36 /10
	9. Name and Address of Curr	ent Registered Age	ent		T		10.	Name and	Addres	s of New	/ Regis	tered A	gent		
	NEV ADTUID I			81	Nam	е									{
	KLEY, ARTHUR J.			82	Stre	et Addres	ss (P.0	O. Box Nurr	nber is N	lot Acce	otable)				
) SW 121 AVE				<u></u>										
DAVI	IE FL 33330			83	1										- 1
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11. Pursuant	to the provisions of Sections 607.0 egistered agent, or both, in the Stat m familiar with, and accept the obli	502 and 607.1508,	Florida Statute	s, the abov	e-name	ed corpor	ration	submits this	statem	ent for th	ne purp	ose of o	hanging	its re	gistered
office or r	egistered agent, or both, in the Stat	te of Florida. Such o	change was an	ithorized by		rporation	n's boa								sterea
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agent. I a				ida Statutes						reby acc		ATE		- 10g	
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	Signature, typed or printed name of registered a	agent and title if applicable. AND DIRECTORS		Registered Age			when reli	Instating)			D	ATE _		TOR	<u> </u>
SIGNATURE	Signature, typed or printed name of registered a OFFICERS A	agent and title if applicable. AND DIRECTORS	(NOTE:	Registered Age			when reli	Instating)			D	ATE _	D DIREC	TOR	S IN 12
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CITY-ST-ZIP 14. I 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 of supplemental annual peport 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 receiver of mustee 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 or an attachate with an adverse, with all other like empowered.

SIGNATURE: