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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # J58368 1. Corporation Name

REALTY CAPITAL GROUP, INC.

					_						
Principal Plac	e of Business	Mailing Address					i inditte dibt attal ibibe titte a				
1007 N. FEDERAL HWY., STE. 50 1007 N. FEDERAL HWY., STE			STE. 50	. 50							
FORT LAUDERDALE FL 33304 FORT LAUDER			ERDALE FL 33304			- }	DO NOT WR	ITE IN THIS	SPACE		
						+	3. Date Incorporated or Qualifed		017.02	:	
							02/23/1987				
2. Principal P	lace of Business	2a. Mailing Address					4. FEI Number	<del></del>	Ap	plied For	
21		26					65-0001667		No	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75		
22		27				5. Certificate of Status Desired	<u> </u>	Fee Re	equired		
City & State		City & State				6. Election Campaign Financing		\$5.00			
23		28					Trust Fund Contribution		Added t	to Fees	
Zip	Country	Zip		untry			8. This corporation owes the cur	rent year Inta			
24	25	29	30				Personal Property Tax.	D 1-1-1	Yes	□No	
	g. Name and Address of Curre	nt Registered Agent		81	Name		10. Name and Address of New	Kegistered	чдепт		
EALL	ET DICHADO			0'	Name		•				
FAUST, RICHARD 1007 N. FEDERAL HWY., #50					Street A	Address	ress (P.O. Box Number is Not Acceptable)				
FORT LAUDERDALE FL 33304				83							
ron	EAUDERDALL TE 33304			03							
				84	City		<del></del> -	FL	85 Zip (	Code	
	to the provisions of Sections 607.05				l		tie halfe this statement for the		changing its	registered	
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	e of Florida. Such change wa	is authorize	a bv	the corpo	oration's	s board of directors. I hereby acce	pt the appoi	ntment as re	gistered	
SIGNATURE	Signature, typed or printed name of registered ag	goal and tale if explicable (N	OTE: Pagietare	ad Ager	o evanatura re	acuired wi	nen reinstating)	DATE			
12.		AND DIRECTORS	13		it signators to		ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTO	ORS IN 12	
TITLE	P DELETE					·Vi	ce President	<del></del>	Change	X Addition	
NAME	FAUST, RICHARD		1.21	NAME		FI	aine Faust	_	_		
STREET ADDRESS			1.3 3	STREE	ADDRESS	100	on N. Federal H	ωy ,# 6	0		
CITY-ST-ZIP	FT. LAUDERDALE FL 33304_			- City-s		F1	. Lauderdale, F	L. 333	304	,	
TITLE	VP	<b>⋈</b> D€LETE		TITLE					Change	Addition	
NAME	BLOCK, MICHAEL		2.21	NAME	1					ľ	
STREET ADDRESS			2.3 9	STREET	T ADDRESS					ļ	
CITY-ST-ZIP	FT. LAUDERDALE FL		2.4	CITY-S	ST-ZIP		april 100m	٠.		<u> </u>	
TITLE	,	☐ DELETE		TITLE					Change	Addition	
NAME			3.2	NAME						,	
STREET ADDRESS	}		33	STREE	TADDRESS					-	
CITY-ST-ZIP			3.4	CITY-S	ST-ZIP						
TITLE		☐ DELETE		TITLE					Change	Addition	
NAME			4. 2	NAME							
STREET ADDRESS			4.3	STREE	T ADDRESS					•	
CITY-ST-ZIP			4.4	CITY-S	T-ZIP						
TITLE		☐ DÉLETE	5,1	TITLE					Change	☐ Addition	
NAME			5.21	NAME						, ,	
STREET ADDRESS			5.3	STREE	T ADDRESS						
CITY-ST-ZIP				CITY-S	T-ZIP			····			
TITLE		☐ DELETE	6.1	TITLE				-	Change	☐ Addition	

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 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, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

Mar 09, 1999 8:00 am Secretary of State

03-09-1999 90046 024 \*\*\*150.00