Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90047 034 ***150.00

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

Mailing Address CIO VENNETU DI WALL OF

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K35269

1. Corpora ion Name

Principal Place of Business

BUSINESS INVESTORS REALTY, INC.

C/O KENNE H H. WALL. SH. 1680 HWY. A1A - P.O. BOX 372408 SATELLITE FEACH FL 32937		1680 HWY. A1A - P.O. BOX 372408 SATELLITE BEACH FL 32337		DO NOT WRITE IN THIS SPACE 3. Date in corporated or Qualified 00/20/1088				
2. Principal Place of Business		2a. Mailing Address			09/29/1988 4. FEI Number 59-2908899			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			rtificate of Status Desired Fee f		Additional cuired	
City & S ate		City & State		Trust Fund Contrib	6. Electio 1 Campaign Financing Trust Fund Contribution		May Be a Fees	
Zip	Country	Zip 29	Country 30			s ccrporation owes the current year Intangible sonal Property Tax.		MNo
24	9 Name and Address of Curren	Name and Add ess of Current Registered Agent			10. Name and Address of New Registered Agent			
	3. Hame and Add ess of Carrain		81	Name				
WAL	l, Kenneth R. Sr.		82 Street Ad		ddress (P.O. Box Number is	Not Acceptable)		
	HIGHWAY A1A			Sileer	Curess (1 .O. Box Humber to			
SATE	ELLITE BEACH FL 32937		83					
			84	City		F	85 Zip (Code
office or re	o the provisions of Sections 607.050; gistered agent, or both, in the State n familiar with, and accept the obligat	of Florida. Such change was สเ	uthorized by	tne corpo	orporation submits this staten ation's board of cirectors. I he	nent for the purpose of ereby accept the appo	f changing its pintment as rec	r agistered g stered
SIGNATURE						DATE		
12.	Signature, typed or printed has ne of registered agen	to and title if applicable. (NOTI::	13.	nt signature re	and when reinstating)	SES TO OFFICERS A	ND DIRECTO	ES IN 12
TITLE	P\$T	DELETE	1,1 TITLE		ABBITTOTOTOTOTO		Change	☐ Addition
NAME	WALL, KENNETH R. SR.	_	1.2 NAMÉ					
STREET ADDRE 3S	1680 HWY A1A		1.3 STREE	TADDRESS				
CITY-ST-ZIP	SATELLITE BCH FL		1.4 CITY-	ST-ZIP				
TITLE	D	☐ DELETE	2.1 TITLE				☐ Change	Addition
NAME	WALL, KENNETH R. SR.		2.2 NAME					
STREET ADDRE 3S	1680 HWY A1A		2.3 STREET ADDRESS					
CITY-ST-ZIP	SATELLITE BCH FL		2.4 CITY					
TITLE	☐ DELETE 3.11		3.1 TITLE				Change	☐ Addition
NAME			3.2 NAME	l				
STREET ADDRE 3S			3.3 STREE	T ADDRESS				
CITY-ST-ZIP			3.4. CITY-	ST-ZIP				Addition
TITLE		☐ DELETE	4.1 TITLE				☐ Change	Addition
NAME			4. 2 NAME					
STREET ADDRE 3S			E	TADDRESS				
CITY-ST-ZIP		Driete	4.4 CITY-	ST-ZIP			☐ Change	Addition
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME				Silange	
NAME				T ADDRESS :				
STREET ADDRE 3S			5.4 CITY-	1				
CITY-ST-ZIP		☐ DELETE	6.1 TMLE	- 1 - Calf			Change	Addition
TITLE			6.2 NAME	İ				
NAME				T ADDRESS				
STREET ADDRE 3S			6.4 CITY-ST-ZIP					
CITY-ST-ZIP			W. F O. I C.					

14. I hereby certify that the information supplied with this filling 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.

SIGNATURE: