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FILED
Apr 29 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # K41476 (8)

1. Corporation Name
ATSET REALTY, INC.

Principal Place of Business

Mailing Address

% ANTHONY TESTA
8065 SE DOUBLETREE DR
HOBE SOUND FL 33455
US

% ANTHONY TESTA
8065 SE DOUBLETREE DR
HOBE SOUND FL 33455
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1988

4. FEI Number

65-0088374

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TESTA, ANTHONY
8065 SE DOUBLETREE DRIVE
HOBE SOUND FL 33455

RICHARD KRESS

81 Name RICHARD KRESS

82 Street Address (P.O. Box Number is Not Acceptable)

805 A-1 SKY PINE WAY

83 PINE RIDGE NORTH VILLAGE IV

84 City WEST PALM BEACH

85 Zip Code FL 33415

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 607.0505, Florida Statutes.

SIGNATURE

Richard Kress

4/24/98

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PTD ☐ DELETE

NAME TESTA, ANTHONY
STREET ADDRESS 8065 SE DOUBLETREE DR
CITY-ST-ZIP HOBE SOUND FL

19 Pitching Way
Scotch Plains NJ
07076

TITLE VSD ☐ DELETE

NAME TESTA, JANICE
STREET ADDRESS 8065 SE DOUBLETREE DR
CITY-ST-ZIP HOBE SOUND FL

19 Pitching Way
Scotch Plains NJ
07076

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PTD ☒ Change ☐ Addition

TESTA, ANTHONY

19 PITCHING WAY

SCOTCH PLAINS NJ 07076

VSD ☒ Change ☐ Addition

TESTA, JANICE

19 PITCHING WAY

SCOTCH PLAINS NJ 07076

☐ Change ☐ Addition

☐ Change ☐ Addition

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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.

SIGNATURE:

JANICE E. TESTA

4/10/98

908 8896808

CR2E034 (10/97)