PROFIT CORPORATION ANNUAL REPORT 1999

DEREUS REALTY, INC.

1. Corporation Name

DOCUMENT # K49181



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90036 006 ***150.00

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Principal Plac	e of Business	Mailing Addr	ess					
2050 ARIANA BLVD. AUBURNDALE FL 33823 2050 ARIANA BLVD. AUBURNDALE FL 33823					DO NOT WEITE	. IN 77110 0DA05	_	
							IN THIS SPACE	
						3. Date Incorporated or Qualifed 12/05/1988		
2. Principal P	lace of Business	2a. Mailing A	ddress			4. FEI Number	L	Applied For
21		26				59-2917677		Not Applicable
Suite, Apt.	#, etc.	Suite, Ap	t. #, etc.			5. Certificate of Status Desired		75 Additional e Required
City & Stat	e .	City & St	ate			Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zip		Country		8. This corporation owes the curren	it vear Intangible	
24	25	29	30	·		Personal Property Tax.	☐Yes	No
	9. Name and Address of Currer					10. Name and Address of New Reg	gistered Agent	
				81	Name			
dereus, marjorie a. 2050 ariana BLVD.			82	Street Add	ddress (P.O. Box Number is Not Acceptable)			
	URNDALE FL 33823		•	83			<u> </u>	
				-			Tor!	7:- Code
	,			84	City		FL 85	Zip Code
office or r agent. I a	to the provisions of Sections 607.050 registered agent, or both, in the State m familiar with, and accept the obligations are secured to the control of the	of Florida. Such c	hange was author	ized by	the corporation	poration submits this statement for the puon's board of directors. I hereby accept t	irpose of changin the appointment a	g its registered as registered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable	(NOTE: Regis	tered Ager	nt signature require	ed when reinstating)	DATE	
12,		ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRE	CTORS IN 12
TITLE	DP		DELETE 1	1.1 TITLE			☐ Cha	ange Addition
NAME	DEREUS, MARJORIE A.		I 1	I.2 NAME	ŕ			
STREET ADDRESS	AASA EDILAIA DILID				TADORESS		*	
	AUBURNDALE FL			1.4 CITY-S				
CITY-ST-ZIP TITLE	AODOTHOREETE			2.1 TITLE	1-211		Cha	ange Addition
		-		2.2 NAME			_	
NAME					T ADDRESS		•	
STREET ADDRESS	(• ,		2. 4 CITY-S	\ \	* **	-	-
CITY-ST-ZIP TITLE				3.1 TITLE	51-21		Cha	ange Addition
NAME		•		3.2 NAME			_	
STREET ADDRESS					TADDRESS			
				3.4. CITY+S	- 1			
CITY-ST-ZIP				11 TITLE			☐ Cha	ange Addition
NAME				4. 2 NAME				
STREET ADDRESS:	,		4		TADDRESS			
CITY-ST-ZIP	!			4 CITY-S				
TITLE				5.1 TITLE			. Cha	ange 🗌 Addition
NAME				5.2 NAME	Ī	• .		
STREET ADDRESS				5.3 STREE	TADDRESS		•	
CITY-ST-ZIP				5.4 CITY-S	T-ZIP			
TITLE				3.1 TITLE	 	<u> </u>	Cha	ange Addition
NAME],	6.2 NAME				
STREET ADDRESS	· f		4	6.3 STREE	TADORESS :			,
CHALL ADDICES	l		,	S A CITY. S	T. 7JP			

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 or changed or on an attachment with an address, with all other like empowered.

SIGNATURE: