

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)**

APPROVED AND FILED *pg 1 of 2*

1997 JUL 22 PM 3:15

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # K62868 (0)**

1. Corporation Name  
**HOME SHOWCASE REALTY, INC.**

Principal Place of Business <b>4731 N. CONGRESS AVE. BOYNTON BCH FL 33462 US</b>	Mailing Address <b>4731 N. CONGRESS AVE. BOYNTON BCH FL 33462 US</b>
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DO NOT WRITE IN THIS SPACE

<b>21</b> 2. Principal Place of Business	<b>26</b> 2a. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country
<b>25</b>	<b>30</b>

<b>3.</b> Date Incorporated or Qualified <b>02/02/1989</b>	<b>3a.</b> Date of Last Report <b>03/26/1996</b>
<b>4.</b> FEI Number <b>65-0096795</b>	Applied For <input type="checkbox"/> Not Applicable
<b>5.</b> Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
<b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
<b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

**9. Name and Address of Current Registered Agent**

**HEISLER, SHIRLEY  
821 OMAR RD  
WEST PALM BEACH FL 33405**

**10. Name and Address of New Registered Agent**

<b>81</b> Name
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>
<b>84</b> City
<b>85</b> Zip Code

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**12. OFFICERS AND DIRECTORS**

TITLE	PTD	<input type="checkbox"/> DELETE
NAME	AMICUCCI, MICHAEL J.	
STREET ADDRESS	29 SWALLOW DRIVE	
CITY-ST-ZIP	BOYNTON BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GAMBLE, GEORGE R. JR	
STREET ADDRESS	6900 W LAKE DR	
CITY-ST-ZIP	W PALM BCH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

<input type="checkbox"/> Change <input type="checkbox"/> Addition
<b>11</b> TITLE
<b>12</b> NAME
<b>13</b> STREET ADDRESS
<b>14</b> CITY-ST-ZIP
<b>21</b> TITLE
<b>22</b> NAME
<b>23</b> STREET ADDRESS
<b>24</b> CITY-ST-ZIP
<b>31</b> TITLE
<b>32</b> NAME
<b>33</b> STREET ADDRESS
<b>34</b> CITY-ST-ZIP
<b>41</b> TITLE
<b>42</b> NAME
<b>43</b> STREET ADDRESS
<b>44</b> CITY-ST-ZIP
<b>51</b> TITLE
<b>52</b> NAME
<b>53</b> STREET ADDRESS
<b>54</b> CITY-ST-ZIP
<b>61</b> TITLE
<b>62</b> NAME
<b>63</b> STREET ADDRESS
<b>64</b> CITY-ST-ZIP

**200002247222--7**  
**-07/24/97--01119--005**  
**\*\*\*\*165.00 \*\*\*\*165.00**

*168 7/22/97*

**14.** I do 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.

CR2E034 (4/97)

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**Home Showcase Realty**

Meadows Square Plaza  
4731 North Congress Avenue  
Lantana / Boynton Beach, Florida 33462-5808  
(407) 642-7400

July 18, 1997

Annual Report Section  
P.O. Box 6327  
Tallahassee FL 32314

To Whom it May Concern:

I wish to inform you that I never received the *Profit Corporation Annual Report* for 1997. If I had received this the fees would have been paid on time, just as I have always paid taxes and fees on time in the past. I own two companies, Amico Mortgage Co. and Home Showcase Realty, Inc. I never received notice on either company.

Upon receipt of the "second notice" on July 17, 1997, which included late penalties, I attempted 35 times to call the number listed on the form, and the telephone was never answered. Also, I attempted calling 850-487-6056 and found the line busy for 3 hours.

On July 18, 1997, I spoke to Angela Revell. She instructed me to submit a check in the amount of \$165.00 (fees excluding penalties) along with this letter of explanation, which I am now doing. Enclosed you will find my check for the amount of \$165.00.

Needless to say, I have been very upset at being charged this outrageous penalty for a situation that I had no opportunity to prevent. I trust this clears up this upsetting situation.

Yours truly,

Michael J. Amicucci  
Director  
**Century 21 Home Showcase Realty**  
**Home Showcase Realty, Inc.**

MJA/pc

enc.

