

L02000000-981 1 of 2

DOCUMENT # L02000000-981
1. Entity Name
Investment Property Management of South
REINSTATEMENT 2003



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 DEC 16 AM 10:07

12/26

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business <i>6013 NW 91 Ave</i> Suite, Apt. #, etc.		3. Mailing Address <i>6013 NW 91 Ave</i> Suite, Apt. #, etc.	
City & State <i>Arnkland, FL</i>		City & State <i>Arnkland FL</i>	
Zip <i>33067</i>	Country <i>Broward</i>	Zip <i>33067</i>	Country <i>Broward</i>

DO NOT WRITE IN THIS SPACE

4. FEI Number <i>743031029</i>	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent	
Name <i>George A. Brudel, Jr.</i>	
Street Address (P.O. Box Numbers Not Acceptable) <i>6013 NW 91 Ave</i>	
City <i>Arnkland</i>	FL Zip Code <i>33067</i>

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* DATE *12/11/03*

FEE IS \$50.00
Make Check Payable to Florida Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>President George A. Brudel, Jr. 6013 NW 91 Ave Arnkland FL 33067</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	REINSTATEMENT 2003
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>700025531817 12/16/03--01055--017 **\$5.00</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: *[Signature]* DATE *12/11/03* Daytime Phone # *561-289-6245*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

CR2E083B (12/02)

2002

**Investment Property Management of South Florida
6013 NW 91 Avenue
Parkland, FL 33067**

Date: December 11, 2003

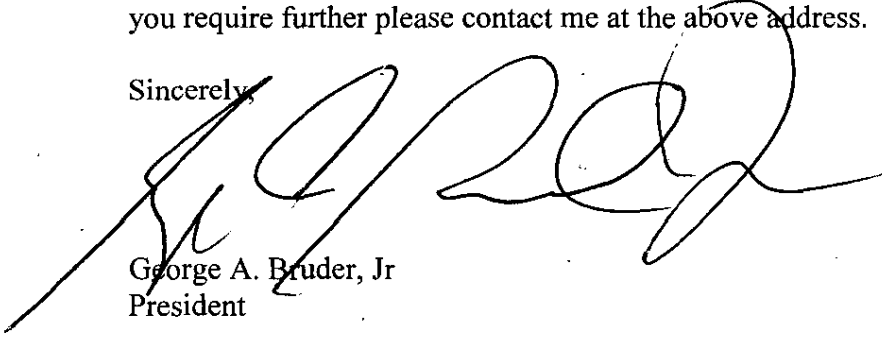
To: Florida Division of Corporations
PO Box 6478
Tallahassee, FL 32314

Re: Annual report

To Whom It May Concern; ---

I am submitting the annual report for my company as required. However, I had been waiting to receive notification requesting this report but did not receive it until I made contact with you agency. Please find your completed form enclosed. If there is anything you require further please contact me at the above address.

Sincerely,



George A. Bruder, Jr
President

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