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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(9)

MERIT REAL ESTATE COMPANY

FILED Apr 28 1998 8:00am Secretary of State

Mailing Address	i illeitet bet tid id mist didt. Brita ital stadt betri didt didt didt didt didt didt didt d
9200 PARK BLVD STE 404 SEMINOLE EL 34647-4136	DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address		(1881/21) And Maio Birds and a serie files aren endir aren eren enem esen enem			
9200 PARK 6	BLVD	9200 PARK BLVD			
STE 404	STE 404 STE 404		DO NOT WRITE IN THIS SPACE		
US US	L 34047-4130	SEMINOLE FL 34647-4136 US			3. Date Incorporated or Qualified
""		•••			09/18/1989
2. Principal f	Place of Business	2a. Mailing Address			4, FEI Number Applied For
21		26			59-2971301 Not Applicable
Suite, Apt	. #, etc.	Suite, Apt #, etc.			\$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Sta	te -: 22777 ///2/	City & State	0077	7-413	6. Election Campaign Financing \$5.00 May Be
23 _Arg			ا ا د ک Count		
Zip '	Country	Zip I	30]	ıy	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 g. Name and Address of Current		<u>suj</u>		10. Name and Address of New Registered Agent
DE	ERMÁN, CAROL ANN		8	1 Name	
	200 PARK BLVD., STE 404		_	<u> </u>	(50 B. N) - (- N. A
	EMINOLE FL 33777-4136		8	2 Street A	ddress (P.O. Box Number is Not Acceptable)
36	CHINGLE FE 00///-4100		8	3	
			<u> </u>	1	last 75 Onds
			8	4 City	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the abo	ve-named (corporation submits this statement for the purpose of changing its registered
office of agent. I	registered agent, or both, in the State of am familian with, and accept the obligat	of Florida. Such change was au tions of Æ ction 607.0505, Flori	itnorizea i ida Statut	oy ine corp es	oration's board of directors. I hereby accept the appointment as registered
SIGNATURE	/// - 0 //	Desman	CAR	COL AI	NN BERMAN
- CONTROLE	Signature, typed or printed name of tegistered agent	and title if applicable (NOTE	Registered A	gent signature i	required when reinstating) DATE
12.	OFFICERS AND	DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	DS DS ANN		1.1 TITLE		
NAME	BERMAN, CAROL ANN		1.2 NAM		
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL DP	DELETE	14 City 21 Title		Change Addition
TITLE NAME	BERMAN, LARRY W		2.2 NAM		onlings t results.
i	AAAA BABU BILID ATE IAI			ET ADDRESS	
STREET ADDRESS	SEMINOLE FL.		2 4 CiTY	· · · · · · · · · · · · · · · · · · ·	
CITY-ST-ZIP	DVT	DELETE	3.1 TITLE		Change Addition
NAME	JOHNSON, JR. J		3.2 NAM		· · · ·
STREET ADDRESS				ET ADDRESS	
CITY-ST-ZIP	SEMINOLE FL		3.4. CITY		
TITLE	DV	DELETE	4.1 TITLE		Change Addition
NAME	JOHNSON, COLLEEN M		4. 2 NAM	IE	
STREET ADDRESS			4.3 STRE	E1 ADDRESS	
CITY-ST-ZIP	SEMINOLE FL		4.4 CITY	- ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAM	E	
STREET ADDRESS			5.3 STRE	ET ADDRESS	
CITY-ST-ZIP			5.4 CITY	-ST-ZIP	
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAM	E	
STREET ADDRESS			6.3 STRE	ET ADDRESS	
OTTY OT THE			C 4 AITY	01. 70	

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 atlachment with an address.

1812/319-0604