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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DiVISION OF CORPORATIONS

DOCUMENT # L30329

(1)

AWS REAL ESTATE, INC.

FILED
Feb 26 1997 8:00am
Secretary of State



Principal Place		Mailing Address *E.E. SEILER, JR. 2000 F OAKLAND PAR	•			4 INDVINGIT DES EITHE BENDS TITLE TIDITO FRIE BYDNI DIBLIT BURTH BYDNI BYDNI BURNI 1001			
FT. LAUDERDA US	ALE FL 33306	FT. LAUDERDALE FL 33308-1804 US			3. Date Incorporated or Qualified				
2. Principal P	lace of Business	2a. Mailing Address 26	├ ─┐			4. FEI Number 65-0156955			oplied For ot Applicable
Suite, Apt.	#, etc.	Suite. Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
City & Stati	е	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country	Zip 29	30 Cot	intry	,		Yes [] No	i. 199.032,
	9. Name and Address of Cur	rent Registered Agent				10. Name and Address of New Re	gistered /	igent	
	LER, E.E. JR.			81	Name				
	2900 E OAKLAND PARK BLVD, STE 200					ress (P.O. Box Number is Not Acceptab	ıle)		
FT.	LAUDERDALE FL 33306			83				****	
				53					
				84	City		FL	85 Zip	Code
agent La SIGNATURE	Signature, typest or printed harrie of registered					tion's board of directors. I hereby accepted when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE		
TITLE	PD	DELETE	1.1 T	ITLE				Change	Addition
NAME	SEILER, E.E. JR.		1.2 N	AME					
STREET ADORESS	2900 E OAKLAND PARK BI	.VD, STE 200	1.3 \$	TREET	ADDRESS				
CITY - ST - ZIP	FT. LAUDERDALE FL		1.4 0	ITY-S	ST-ZIP				
TITLE		☐ DELFTE	2.1 T	ITLE				Change	Addition
NAME			2.2 N	AME			-		
STREET ADDRESS			2.3 S	TREE	ADDRESS				
CITY-SI ZIP		☐ DELETE		*******	ST-ZIP		· · · · · · · · · · · · · · · · · · ·	Change	Addition
TUTLE		☐] DETER	31 T		Ī			Change	☐ Modition
NAME STREET ADDRESS					F ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE	// M	DELETE	4.1 T					Change	Addition
NAME			4.21	MAME					
STREET ADORESS			4.3 S	TREE	T ADDRESS				
CITY+ST-ZIP			4.4 0	ITY - S	ST-ZIP				
TITLE		DELETE	5.1 T	ITLE				☐ Change	Addition
NAME			l l	AME					
STREET ADDRESS			5.3 8	TREE	F ADDRESS				
C TY-ST-7IP		Dr. rec			915-18		· · · · · · · · · · · · · · · · · · ·	Chance	Addition
TITLE		DELETE	6.1 T					☐ Change	Addition
NAME				IAME					
STREET ADDRESS					ADDRESS				
City - S1 - 7iP	l		6.4 0	JTY-S	ST - ZIP				

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 agricult 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 plock 13 if changed, or in an appearance with an address.

SIGNATURE

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

2/20/97 954564-4556