FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # L30359

1. Corporation Name

(8)

TEAM EFFORT REALTY, INC.

I EAWI E	EFFORT REALITY INC.								
Principal Place of Business Mailing Address						E INDICES AND HIST DANCE DICE. BELLE	18t) A1811 A1811 E1611 A1		
633 SE 3RD. AVE. SUITE 4R FT. LAUDERDALE FL 33301 US		633 SE. 3RD AVENUE SUITE 4-R FT.LAUDERDALE FL 33501 US					-		
					3. Date Incorporated or Qualified 11/14/1989	05/01/1995			
2. Principal Pla	ce of Business	2a. Mailing Address 26				4. FEI Number 65-0452197		Applied For Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		75 Additional e Required	
City & State		City & State	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
7 _{ip}	Country 25	Zip 29	Country 30			8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			
27)	9. Name and Address of Curr		1			10. Name and Address of New Ro	egistered Agent		
				61 N	lame				
SINDACO, JOSEPH P. 633 S.E. 3RD AVE.				82 5	treet Addre	ess (P.O. Box Number is Not Acceptable	e)		
STE. 4-R			<u> </u>	83					
	AUDERDALE FL 33301				N.		los!	Zip Code	
PORT D	ODENDALE FL 30001			84 (City		FL B5	Zip Code	
or registers	o the provisions of Sections 607.05 ed agent, or both, in the State of Fi h, and accept the obligations of, Se	orida. Such change was autho	nzea by the c	/e-nan orpora	ned corpora tion's board	ation submits this statement for the pur d of directors. I hereby accept the appo	pose of changing it bintment as register	s registered office ed agent. I am	
SIGNATURE _	Signature, typed or printed name of registered as	and title if applicable	NOTE: Registered	Agent sic	mature required	when reinstaling	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	TORS IN 12	
TITLE	DP	DELETE	1.11(TLE			☐ Chang	ge 🔲 Addition	
NAME			1,2 NA	1.2 NAME					
STHEFT ADDRESS	633 S.E. 3RD AVENUE, SU	IITE 4-R	1.3 \$T	REET AD	DRESS				
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CI	Y-ST-2	iP				
TITLE		DELETE	2 1 TI	2 1 TITLE			☐ Chang	ge 🗌 Addition	
NAME			22 NAME						
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NAME			3.2 N						
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NAME			4.2 N/						
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STREET ADDRESS				REET AD TY-ST					
CITY-ST-7IP		☐ DELETÉ	6 1 T		ur		Chan	ge 🔲 Addition	
THILE		Cotten	62 N						
NAME				IREET AL	nngess				
STREET ADDRESS				INEET AL					
1 CITY ST. 702	1								

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

SIGNATURE

Date

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