PRO CORPOF ANNUAL F	RATION REPORT		FLORIDA DEP Sandra	ARTMENT O B. Mortha tary of State	F STATE m	Apr 17 1 Secreta																																						
DOCUME 1. Corporation Name RESORTREP Principal Place of BL	VILLAS, INC.		(8)																																									
4105 BRENTWOOD PARK TAMPA FL 33624 US		P.O.	C/O SUZANNE CHIN P.O. BOX 271367 TAMPA FL 33688			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified																																						
						11/27/1989																																						
2, Principal Place of	Business	h	ailing Address			4. FEI Number		pplied For																																				
Suite, Apt. #, etc.		26 Su	uite, Apt. #, etc.			<u>59-2985898</u>	20 7E	ot Applicable Additional																																				
City & State		27	ity & State		,	5. Certificate of Status Desired	Fee R	equired																																				
		28	ity & State			6. Election Campaign Financing Trust Fund Contribution		May Be to Fees																																				
Zip	Country 25 Name and Address of C	Zij 29		Count 30	ſŸ	8. This corporation owes or has personal Property Tax due June 10. Name and Address of New Re	e 30. 🔲 Yes [tangible No																																				
CHIN, SU		ALLOW TROUBLES		8	1 Name		efteraren wilett																																					
		··			2 Street Add	Iress (P.O. Box Number is Not Accepta	ble)	·····																																				
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