SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

CORPORATION ANNUAL REPORT

1**9**98

C/O ELLI PILNIK 4113 N.W. 46TH DRIVE

GAINESVILLE FL 32606

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(5)

GAINESVILLE FL 32606

FLORIDA PROPERTY INVESTMENT, INC.

Principal Place of Business Mailing Address C/O ELLI PILNIK 4113 N.W. 46TH DRIVE

FILED Sep 24 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

				02/15/1990	
2. Principal Place of Business		2a. Mailing Address 26		4. FEI Number	Applied For
21				59-2996717	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cu	
24	25	29	30	1	Yes No
	9. Name and Address of Currer	it Registered Agent		10. Name and Address of New Registered	Agent
PILNIK, E lli				81 Name	
4113 N.W. 46TH DRIVE GAINESVILLE FL 32606			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)	
			83		
			84 City	FI	85 Zip Code
agent. i a	to the provisions of sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	2 and 607.1508, Florida Statute of Florida. Such change was ations of, section 607.0505, Fl	es, the above-named corp authorized by the corpora orida Statutes.	poration submits this statement for the purpose of cation's board of directors. I hereby accept the appo	hanging its registered Intment as registered
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (N	OTE: Registered Agent signature re	equired when reinstating) DATE	
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	PILNIK, ELLI		1.2 NAME		
STREET ADDRESS	4113 N.W. 46TH DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	GAINESVILLE FL		1.4 CITY-ST-ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME .		L_1 occur	2.2 NAME		C. C. Lauren
STREET ADDRESS			2.3 STREET ADDRESS	,	
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME		[3.2 NAME		onongo ricanon
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		F-1 PECC (F	4.2 NAME		origing Hoodoll
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		Principle [] Modified
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	•	
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		T"I DETEIR	6.2 NAME		Change [1] Apputon
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		11. 60	6.4 CITY-ST-ZIP	0 440 07/0/0 50 31 0 4 4 4 4 4 4 4	

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 attachment with an address.