FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90128 043 ***150.00

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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # L55227

1. Corporation Name

Principal Place of Business

DEPENDABLE REALTY, INC.

% RICHARD MEREUS. SR. 1548 NE 4TH AVE. FT. LAUDERDALE FL 33304		% Richard Mereus. Sr. 1548 Ne 4th Ave. Ft. Lauderdale Fl. 33304				DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 03/06/1990					
2, Principal Pl	ace of Business	2a. Mailing Address					El Number			App	lied For
		26				65-0198493					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 25	Zip 30	Country	,			his corporation owes the curre Personal Property Tax.		ngible Yes		□No
	9. Name and Address of Curre	nt Registered Agent				10. N	lame and Address of New R	egistered A	gent		
			81	1	Name						
MEREUS, SR., RICHARD 1548 NE 4TH AVE.			82	-	Street Addre	dress (P.O. Box Number is Not Acceptable)					
FT. L	AUDERDALE FL 33304										•
Superior Control of the			84		City			FL	85	Zip C	ode
office or re	to the provisions of Sections 607.056 egistered agent, or both; in the State in familiar with, and accept the obligations.	e of Florida. Such change was autic	mzeu by	ule	named corpore corporation	oration s on's boar	submits this statement for the properties of directors. I hereby accept	ourpose of o t the appoin	:hangii tment	ng its i as reg	egistered istered
SIGNATURE	Signature, typed or printed name of registered age	ent and title if applicable /NOTE: Rec	ictored Ager	nt ex	agnature required	d when rein	nstating)	DATE			
12.		ND DIRECTORS	13.		- Indiana		DITIONS/CHANGES TO OFF	ICERS AN	D DIRI	ECTO	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE						Ch	ange	☐ Addition
NAME	MEREUS, SR., RICHARD		1.2 NAME								
STREET ADDRESS			1.3 STREET ADDRESS		DDRESS						ļ
CITY-ST-ZIP			1.4 CITY-ST-ZIP		ZIP						
TITLE		☐ DELETE	2.1 TITLE						☐ Ch	ange	☐ Addition
NAME			2.2 NAME		Ì						
STREET ADORESS			2.3 STREE	TAE	DDRESS		* * . **	,	-		
CITY-ST-ZIP	management of the contract of	المستوا المي يميا سيا	2. 4 CITY-5	4 CITY-ST-ZIP							
TITLE		☐ DELETE	3.1 TITLE						Ch	ange	☐ Addition
NAME			3.2 NAME								ı
STREET ADDRESS	RESS 3		3.3 STREET ADDRESS		DDRESS						
CITY-ST-ZIP			3.4. CITY-S	3.4. CITY-ST-ZIP							
TITLE		☐ DELETE	4.1 TTLE		-				☐ Ch	ange	☐ Addition \
NAME		4.		4. 2 NAME							
STREET ADDRESS			4.3 STREE		DORESS		,				
CITY-ST-ZIP	<u> </u>		4.4 CITY-S		ZIP						
TITLE		☐ DELETE	5.1 TITLE				•		☐ Ch	ange	Addition
NAME	f		5.2 NAME								
STREET ADDRESS			5.3 STREE	TAE	DDRESS						
CITY-ST-ZIP			5.4 CITY-S	T∙Z	ZIP						
TITLE		☐ DELETE	6.1 TITLE						☐ Ch	ange	☐ Addition
NAME			6.2 NAME								1
STREET ADDRESS		1	6.3 STREE	TAE	DDRESS						J

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 attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

PRINTED NAME OF SIGNING OFFICER OR DIRECTOR