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

PROFIT CORPORATION ANNUAL REPORT

1996

LD REALTY, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

L58120

(1)

FILED
May 01 1996 8:00 am
Secretary of State



Principal Place of Business

1. Corporation Name

2213 E. ATLANTIC BLVD. POMPANO BEACH FL 33062-2209 Maling Address

2213 E. ATLANTIC BLVD. POMPANO BEACH FL 33062-2209

				3. Date Incorporated or Qualified 03/13/1990	3a. Date of Last Report 04/20/1995	
<del></del>		2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0190545	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	5.00 May Be	
23		28		Trust Fund Contribution	Added to Fees	
Zφ	Country	Zip	Country	This corporation has liability for		
4	25	29	30	4	<b>X</b> No	
	g, Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New R	egistered Agent	
			81 Name			
DEMARCO, LOUIS F			82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)		
	e. Atlantic blvd.					
POMP/	ANO BEACH FL 33062		83	83		
			84 City		85 Zip Code	
			[ ] •,		FL   50   24 0000	
SIGNATURE _	Signature, hypercor protectina ne of registrated agreed OF FICE BS AN	talente l'appendié D DIRECTORS	NOTE: Registered Agent signar ire regin	ADDITIONS/CHANGES TO OFF	DATE	
TITLE	D OF HOLING AN	DELETE	13. 1.1 THE	ADDITIONS/GHANGES TO OFF	Change Addition	
NAME	DEMARCO, LOUIS F				Clade Ascion	
STREET ADDRESS	4420 N.E. 25TH AVE.		1.2 NAME			
	FOR LAUDERDALE FL		1.3 STREET ADORESS			
CITY - ST - ZIP TITLE	PST	DELETE	1.4 CITY - ST - 7IP 2 1 TITLE	**	Change Addition	
NAME	DEMARCO, LOUIS F.	_ been	2 2 NAME		Change E Addition	
STREET ADDRESS	4420 N.E. 25TH AVE.		2.3 STREET ADDRESS			
City-St-ZiP	FORT LAUDERDALE FL		2 4 CITY - ST ZIP			
TITLE		DELETE	3 1 TiTLF		Change Addition	
NAME			3.2 NAME	•		
STREET ADDRESS			3.3 STREET ADDRESS			
CiTY · ST · ZIP			3 4 C-1Y - ST - ZIP			
TITLE		DELETE	4 1 7 TEE		Change Addition	
NAME			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY - ST - ZIP			4.4.0:TY - ST - Z:P			
TITLE		DELETE	5 1 TIFLE		Change Addition	
NAME			5.2 NAME			
STREET ACORESS			5.3 STHEET ADDRESS			
CHTY - ST - ZIP	<u> </u>		5.4 CiTY - ST - ZiP			
TITLE		☐ DÉLETE	6 1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY - ST - ZIP			6.4 CITY - \$7 - 7:P			

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and cloes 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:

KTUUS LIPH AUG IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Louis DeMarco 4/17/96 (521) 785 3855

CR2E034 (12/95)