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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L58120 1. Corporation Name

LD REALTY, INC.

FILED Apr 19, 1999 8:00 am Secretary of State

04-19-1999 90063 047 ***150.00

	 	

Principal Place	e of Business	Mailing Address					
2213 E. ATLAN	TIC BLVD.	2213 E. ATLANTIC BLVD.					
POMPANO BEA	ICH FL 33062-2209	POMPANO BEACH FL 3306	2-2209		DO NOT WRITE IN	THIS SPACE	
					3. Date Incorporated or Qualified	THIS OF FICE	
		•			03/13/1990		l
	No. of Building	O Mailing Address		-	4. FEI Number		Applied For
Principal Place of Business 2a. Mailing Address			65-0190545		 	Not Applicable	
21		26			0070190040	\$8.7	5 Additional
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Required
22		27		_			
City & Stat	te	City & State			6. Election Campaign Financing		00 May Be ed to Fees
23		28			Trust Fund Contribution		ed to rees
Zip	Country	Zip	Countr	у	8. This corporation owes the current ye	ar Intangible ☐ Yes	□No
24	25	29	30		Personal Property Tax.		
	9. Name and Address of Curren	t Registered Agent	8	1 Name	10. Name and Address of New Regist	ereu Agent	-
ם ביי	ADOO LOUIS E		0	Name			
	IARCO, LOUIS F		8:	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		
	B E. ATLANTIC BLVD.						
POM	IPANO BEACH FL 33062		8:	3			İ
}	š		-	4 04.		85 2	ip Code
	•		8	4 City		FL "	ip code
11 Pursuant	to the provisions of Sections 607.050.	2 and 607:1508, Florida Statute	es, the abo	ve-named co	rporation submits this statement for the purpo	se of changing	its registered
l office or r	registered agent or both in the State :	ot Florida. Such change was at	utnorizea b	v the corpora	tion's board of directors. I hereby accept the	appointment as	s registered
agent. i a	am familiar with, and accept the obligat	1015 OI, Section 607.0555, Mon	iua Statute	φ.	4	-12-89	
SIGNATURE	Signature, typed or printed name of registered agen		Registered Ac	ent signature recu	ured when reinstating)	ITE Z Z Z	
	Signature, typed or printed vibilitie or registered agen	the contract of the contract o					
12	OFFICERS AN	ID DIRECTORS		_	ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	CTORS IN 12
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIREC	
TITLE	D		13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICE		
TITLE NAME	D DEMARCO, LOUIS F		13. 1.1 TITLE 1.2 NAME	:	ADDITIONS/CHANGES TO OFFICE		
TITLE NAME STREET ADDRESS	D DEMARCO, LOUIS F 4420 N.E. 25TH AVE.		13. 1.1 TITLE 1.2 NAME 1.3 STRE	ET ADDRESS	ADDITIONS/CHANGES TO OFFICE		
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6.4 CITY-ST-ZIP CITY-ST-ZIP 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 a attachment with an address, with all other like empowered.

4-12.89