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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

ANNU	CORPORATION ANNUAL REPORT 1997		Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					Secretary of State				
	MENT # L' REALTY, INC.	76743	(8)					L COULE HEEL HULF EIGER OU KENIEREL		Si 114 0 118 0 1)()()()	
Principal Piace of Business Mailing Address												
390-U BUSINES		390-U BUSINESS PKWY ROYAL PALM BEACH FL 33411										
								3. Date Incorporated or Qualified 05/29/1990		te of Last F 1/1996	leport	
— ₁	lace of Business	26	a. Mailing Address					4. FEI Number 65-0197660		} ————————————————————————————————————	oplied For of Applicable	
Suite, Apt	#, etc.	27	Suite, Apt. #, etc.					Certificate of Status Desired		\$8.75	Additional equired	
City & Stat	6		City & State					6. Election Campaign Financing			May Be	
23	Cou	ntry 28	Zip	Co	untry			Trust Fund Contribution 8. This corporation has liability for	or intangible		to Fees 199 032	
24]	25	29		30	·			Florida Statutes	Yes [] No		
EU6.		iress of Current Reg	istered Agent		81	Name		10. Name and Address of New	legistered /	Agent		
PUSICN, DNIAN							Address	s (P.O. Box Number is Not Accept	abla)			
ROYAL PALM BEACH FL 33411						Sueetr		s (r.o. box ridinoer la riot Accep-	abie)			
					83							
					84	City			FL	85 Zip	Code	
11. Pursuant	to the provisions of S	ections 607.0502 and	607.1508, Florida Sta	tutes, the a	boy	e-named (corpor	ation submits this statement for the	purpose of	changing i	ts registered	
agent La	registered agent, or to am familiar with, and a	cont the obligations	of, Section 607,0505,	Florida Sta	itute:	r ine corp 3.	Oration	's board of directors. I hereby acc	ept trie app	JIHIHOH ES	registered	
SIGNATURE	BRIAN FO	STER PRES	IDENT Z	ALA L	ed Aoe	nt signature	required	when reinstating)	3/25/	97		
12.		OFFICERS AND DIR		13.				ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12	
TIT(E	P\$		☐ DELETE		ITLE					☐ Change	Addition	
NAME	Foster,Brian 6580 Royal Pal	M DEVUM BITA			IAME	, Dancen						
STREET ADDRESS CITY+ST-ZIP	WEST PALM BEA				STAFET STA - 2	ADDRESS	<u> </u>				}	
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NAME	}				LAME							
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do 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.

SIGNATURE: Brian Foster

3/25/97

561-798-6787 0521729

FILED

Mar 28 1997 8:00am