Mailing Address

6533 FAIRWAY HILL CT

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **L81483**

1. Corporation Name

Principal Place of Business

6533 FAIRWAY HILL CT

PLAZA DEL SOL REAL ESTATE, INC.

| STE 508 STE 508 ORLANDO FL 32835 ORLANDO FL 32835 | | | | | DO NOT WRITE IN THI | S SPACE | |
|---|--|-----------------------------------|-------------|----------------------------------|--|----------------------------|------------------------------|
| US US | 2003 | US | | | 3. Date Incorporated or Qualifed 06/14/1990 | | |
| 2 Principal Pl | ace of Business | 2a. Mailing Address | | | 4. FEI Number | TT | Applied For |
| 21 | | 26 | | 65-0210592 | | Not Applicable | |
| Suite, Apt. #, etc. | | Suite; Apt-#, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | | |
| 22 City & State | | City & State | | | 6. Election Campaign Financing | \$5.0 | 00 May Be |
| 23 | | 28 | ¬ ' | | Trust Fund Contribution Added to Fees | | |
| Zip | Country | Zip | Country | | 8. This corporation owes the current year li | ntangible | |
| 24 | 25 | 29 30 |] | | Personal Property Tax. | ☐ Yes | □No |
| | 9. Name and Address of Curren | | | | 10. Name and Address of New Registere | d Agent | |
| | | | 81 | Name | | | |
| POOLE IV, WILLIAM F. | | | 82 | Stroot Adds | ess (P.O. Box Number is Not Acceptable) | | |
| 644 \ | W COLONIAL DR | | 02 | Street Addit | ess (F.O. Box Number is Not Acceptable) | | |
| ORL/ | ANDO FL 32804 | | 83 | | | | |
| | | | | | | 11 - | *- O-d- |
| | | | 84 | City | F | L 85 Z | ip Code |
| office or re | to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the obligation | of Florida. Such change was autho | onzed by | tne corporatio | oration submits this statement for the purpose on's board of directors. I hereby accept the app | of changing pintment as | its registered registered |
| SIGNATURE | | | | | d when reinstating) DATE | | |
| | Signature, typed or printed name of registered ager | ID DIRECTORS | 13. | t signature required | ADDITIONS/CHANGES TO OFFICERS A | ND DIREC | TORS IN 12 |
| TITLE | PD OFFICERS AN | DELETE | 1.1 TITLE | | ADDITIONOLO INTICEE TO CONTROLLE | Chan | |
| 1 | PHILLIPS, RON | | 1.2 NAME | | | _ | |
| NAME | 6533 FAIRWAY HILL COURT | | 1.3 STREET | ADDESS | | | |
| STREET ADDRESS | ORLANDO FL | | 1.4 CITY-S | | | | ļ |
| CITY-ST-ZIP TITLE | S S | ☐ DELETE | 2.1 TITLE | 1-41 | | ☐ Chan | ge Addition |
| NAME | | | 2.2 NAME | | | | |
| | PHILLIPS, ELAINE 6533 FAIRWAY HILL COURT | | 2.3 STREET | ADDRESS | | | |
| STREET ADDRESS | ORLANDO FL | | 2.4 CITY-S | - 1 | | | · - |
| CITY-ST-ZIP | ORLANDO FL | [] DELETE | 3.1 TITLE | 1-217 | | Chan | ige Addition |
| | | | 3.2 NAME | | | | ļ |
| NAME | | | 3.3 STREET | ADORESS | | | 1 |
| STREET ADORESS | | | 3.4. CITY-S | | | | |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 4.1 TITLE | | | Chan | nge Addition |
| NAME | | _ · · | 4, 2 NAME | | | | |
| STREET ADDRESS | | | 4.3 STREET | ADDRESS | | | |
| CITY-ST-ZIP | • | | 4.4 CITY-S | | | | , |
| TITLE | | ☐ DELETE | 5.1 TITLE | | - William - Will | Chan | nge 🔲 Addition |
| NAME | | _ | 5.2 NAME | | | | , |
| STREET ADDRESS | | | 5.3 STREET | ADDRESS | | | J |
| CITY-ST-ZIP | | | 5.4 CITY-S | T-ZIP | | | |
| TITLE | | ☐ DELETE | 6.1 TITLE | | | Chan | ge Addition |
| T . | 内设铁头 95000 | | 6.2 NAME | | | | |
| | 以1000年前,1200年 | | 6.3 STREET | ADDRESS | | | ł |
| | | | 6.4 CITY-S | T-ZIP | | | 1 |

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, withyall other like empowered.

SIGNATURE:

FILED Apr 15, 1999 8:00 am Secretary of State

04-15-1999 90035 030 ***150.00