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

Mailing Address

2500 MILITARY TRAIL

PROFIT CORPORATION ANNUAL REPORT 1999

1. Corporation Name

Principal Place of Business

2500 MILITARY TRAIL



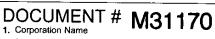
FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90157 024 ***150.00



GERSPER REALTY AND INVESTMENTS, INC.

BOÇA RATON	FL 33431	SUITE 200 BOCA RATON FL 33431					DO NOT HE	NTE IN TO 10		
		DOCK RATON PL 33431			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
						04/28/	•	1		
2. Principal I	Place of Business	2a. Mailing Address				4. FEI Num				·····
1		26				1			-	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.				<u>59-279</u>	30 19			Not Applicable
2		27				5. Certificate of Status Desired				
City & Sta	te	City & State				- 51 11 1				
.3		28				6. Election Campaign Financing \$5.00 May Be				
Zip	Country	Zip Country				Trust Fund Contribution Added to Fees				
4	25	29	30	,		8. This corporation owes the current year Intangible				
9. Name and Address of Current Registered Agent						Personal Property Tax. Yes No 10. Name and Address of New Registered Agent				
				81	Name	IV. Haille all	U AUGIESS OF NEW	Registered /	Agent	
FRIC	CKE, HENRY		L							
	D MILITARY TRAIL		82 Street Ac			ddress (P.O. Box Number is Not Acceptable)				
	TE 200 CA RATON FL 33431		-	83						
ВОС	A RATUN FL 33431		1	84	City		<u> </u>		85 Zir	Code
11 Pursuant	to the provisions of Sections 607 050	2 and 607 1509. Florida Ct-64	- 4					<u>FL</u>		
	to the provisions of Sections 607.0502 egistered agent, or both, in the State of familiar with, and accept the obligations.				named corpo e corporation	pration submits t n's board of dire	his statement for the	purpose of o	changing i	ts registered
agent. I a	m familiar with, and accept the obligat	tions of, Section 607.0505, Flo	rida Statut	es.				pr are appear	· ·	registered
SIGNATURE	Clean to add a sint to the sin									
12 .	Signature, typed or printed name of registered agen			gent si	gnature required	when reinstating)		DATE		
TILE	PD OFFICERS AN	DELETE	13.			ADDITION:	S/CHANGES TO OF	FICERS AN		
IAME	GERSPER, LAURA K.	□ pereie	1.1 TITLI						☐ Change	e ☐ Addition
			1.2 NAM						•	
STREET ADDRESS	2500 MILITARY TRAIL #200		1.3 STRE	EET AD	DRESS		•			ļ
TITY-ST-ZIP	BOCA RATON FL		1.4 CITY		IP			·		-
TITLE :		☐ DEŁETE	ELETE 2.1 TITLE						☐ Change	☐ Addition
NAME			2.2 NAM	E						1
TREET ADDRESS			2.3 STR	ETAD	DRESS					
TY-ST-ZIP			2. 4 CITY	-ST-Z	IP					ł
ITLE		☐ DELETE	3.1 TITLE	=					Change	Addition
IAME			3.2 NAME	E					_ •	-
TREET ADDRESS			3.3 STRE	ET ADI	DRESS				•	i
ITY-ST-ZIP			3.4. CITY	-ST-21	IP		•			
MLE		☐ DELETE	4.1 TITLE					·	☐ Change	Addition
AME			4. 2 NAM	F						, tadadoii
TREET ADDRESS				4.3 STREET ADDRESS						1
TY-ST-ZIP			4.4 CITY-							•
TLE		☐ DELETE	5.1 TITLE		-	•	7.2.			
ME			5.2 NAME						☐ Change	Addition
TREET ADDRESS			5.3 STRE		nosee					1
TY-ST-ZIP										
TLE		☐ DELETE	5.4 CITY- 6.1 TITLE				<u> </u>			·
ME		□ nereie	1				•		☐ Change	Addition
TOCCT LODGE			6.2 NAME					•		

4. 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.

(<u>561) 997-6666</u>