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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # M88377

I.B.O. RE	EALTY, INC.				
Principal Place 10500 SW 141 MIAMI FL 33186 US	AVENUE	Mailing Address 10500 SW 141 AVE MIAMI FL 33186 US		DO NOT WRITE IN  3. Date Incorporated or Qualifed	
2. Principal Pl	ace of Business	2a. Mailing Address		06/27/1988 4. FEI Number 65-0060755	Applied For Not Applicable
Suite, Apt. i	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip <b>24</b>	Country 25		Country 30	This corporation owes the current yes     Personal Property Tax.	☐ Yes ☐ No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Regist	ered Agent
VELIKOPOLJSKI, SERGIO 10500 SW 141 AVE MIAMI FL 33186			82 Street Add 83 84 City	iress (P.O. Box Number is Not Acceptable)	FL 85 Zip Code
SIGNATURE	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligations of the state of registered agent.	<u></u>	s, the above-named corp thorized by the corporati da Statutes.	poration submits this statement for the purpoion's board of directors. I hereby accept the	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS	PD VELIKOPOLJSKI, SERGIO 10500 S.W. 141ST AVE.	☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	等。 <b>全国的</b>	☐ Change ☐ Addition
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE NAME STREET ADDRESS	ST VELIKOPOLJSKI, SERGIO 10500 S.W. 141ST AVE. MIAMI FL	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME	Market Commence	☐ DELETE	3.1 TITLE 3.2 NAME		☐ Change ☐ Addition
STREET ADDRESS CITY-ST-ZIP	G. Charle	☐ DELETE	3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE	(1) (2) (2) (2) (2) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4	☐ Change ☐ Addition
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CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME	15 g   \$ 740 t	☐ Change ☐ Addition

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, with all other like empowered.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

P. Senton

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

VN SECON VELLKOROLISKI - PRESIDEUT

☐ DELETE

**FILED** 

Feb 18, 1999 8:00am

**Secretary of State** 

02-18-1999 90029 045 \*\*\*150.00

Change

Addition