FILED

Feb 22, 1999 8:00 am

Secretary of State

02-22-1999 90084 025 ***150.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # M90799

1. Corporation					
SPACE I	HUNTER REALTY, INC.				
D-incipal Disco	o of Dusinger	Mailing Address		<u> </u>	BHEN BIBIT BIBIT BIBIT BIBIT BIBIT BERN KREU
Principal Place		1950 LEE RD.STE 101		1	
1950 LEE RD. STE 101					
US		US		DO NOT WRITE IN	THIS SPACE
				3. Date Incorporated or Qualifed 07/25/1988	
1 Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
2. 7 (incipal 7)	lace of Business	26		59-2907532	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certifcate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	 This corporation owes the current ye Personal Property Tax. 	ar Intangible ☐ Yes ☐ No
24	9. Name and Address of Curre	29 Agent	30	10. Name and Address of New Regist	
	5. Name and Address of Corner	it rogistered regard	81 Name Z		1 2
	OCCHIARO, JOAN		82 Street Addr	INOCCHIARD HAR ress (P.O. Box Number is Not Acceptable)	COLD
	S SANOMA VILLAGE ROAD		496	6 SANOMA VILLAG	ie Rd.
ORL	ANDO FL 32808		83		
			84 City		85 Zip Code
				Fréngo	FL 132808
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statut	es, the above-named corp	poration submits this statement for the purpoon's board of directors. I hereby accept the	se of changing its registered appointment as registered
agent. I a	m familiar with, and ccept the opliga	ations of, Section 607.0505, Flo	rida Statutes.	oration submits this statement for the purpo on's board of directors. Fhereby accept the	11/00
SIGNATURE	Hall Timet	- HAROLI	FINOCOLIA Registered Agent signature require	prior //	7/49
12.	Signature, typed or printed name of registered age	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTORS IN 12
TITLE	DPV	☐ DELETE	1.1 TiTLE		☐ Change ☐ Addition
NAME	BURNSTEIN, MARTIN W		1.2 NAME		
STREET ADDRESS	3028 ORLEANS WY N				1
CITY-ST-ZIP	APOPKA FL		1.3 STREET ADDRESS		
TITLE			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
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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 an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR