SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP

MILLER, RUEBEN

N. MIAMI FL 33162

18040 N.E. 10TH AVE.

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

FILED

Jul 16 1998 8:00am

Secretary of State

Change Addition

Sandra B, Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # N9700001968 (3)

REMM COMMUNITY DEVELOPMENT, INC.

Principal Place of Business Mailing Address						
4015 NORTH U.S. #1 NORTH COCOA FL 32927		4015 NORTH U.S. #1 NORTH COCOA FL 32927				3. Date Incorporated or Qualified 04/07/1997
						4. FEI Number Applied For
						Not Applicable
2. Principal P	Place of Business	2a. Mailing Address 26				5. Certificate of Status Desired \$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be
22		27				Trust Fund Contribution Added to Fees
City & Stat	le	City & State				7. Is this nonprofit corporation a homeowners association?
23		28				YesNo
Zip			Coun	try		8. This corporation owes or has paid the current year intangible
24	25		30			Personal Property Tax due June 30. Yes No
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent
			1	81	Name	
MILLER, QUAN 4015 NORTH U.S. #1 NORTH			Ī	82	Street Ad	Address (P.O. Box Number is Not Acceptable)
COCOA F			1	B3		
COCOAT	C Oper			_		
			1	84	City	FL 85 Zip Code
11. Pursuant to the provisions of sections 617.0502 and 617.1508, Florida Statutes, the ab				9-na	med corpo	poration submits this statement for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 617.0503, Florida Statutes.						
SIGNATURE						regulred when rainstating) DATE
12. OFFICERS AND DIRECTORS 13			13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITL	.E		L change Addition
NAME	MILLER, QUAN		1.2 NAA	ΛE	.	Miller, Quan L.
STREET ADDRESS	1438 VICTORIA BLVD.		1.3 STR	EET	ADDRESS	Miles September
CITY-ST-ZIP	ROCKLEDGE FL 32955		1.4 CIT	Y-ST-	-ZIP	
TITLE	SÕ	DELETE	2.1 TITLE			Change Addition
NAME	MILLER, PRISCILLA L	-		Æ	- 1	
STREET ADDRESS			2.3 STR	EET/	ADDRESS	
CITY-ST-ZIP	- Annual material and action		2.4 CITY	Y-ST-	-ZIP	
TITLE			3.1 TITL	Æ		Change Addition
NAME	MILLER, ASTON D		3.2 NAM	ΛE		
STREET ADDRESS			3.3 STR	EEY/	ADDRESS	
CITY-ST-ZIP	1		3.4 CITY	Y-ST-	-ZIP	
TITLE			4,1 TITL			Change Addition
NAME	MENENDEZ, CAROLYN L		4.2 NAM	ΑE		
STREET ADDRESS			4.3 STR	EET/	ADDRESS	
CITY-ST-ZIP			4.4 CITY	1.4 CITY-ST-ZIP		
TITLE	D.	DELETE	5.1 TITL		$\neg +$	Change Addition
NAME	MILLER, BENJAMIN F		5.2 NAM	Æ		
STREET ADDRESS	550 N.W. 21 CT.		5.3 STRI	EET/	ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33060		5.4 CITY	Y-ST-	ZIP	

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes, or on an attachment with an address.

DELETE