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

PROFIT CORPORATION ANNUAL REPORT

1998

TITLE

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS CITY - ST- ZIP

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P92000001767 (2)

RANCO REALTY CORPORATION

	TIENETT OOM ONTO	'					
Principal Plac	e of Business	Mailing Address				-{ I HERRIFERDY LYR. IRANG TIRAH BRIAH BRAHH BRAHH BRAHH BRAHD LIRAH BA	LAN DISKI ADDI ADDI
1234 NW 79TH ST. 1234 NW 79TH ST. MIAMI FL 33147 MIAMI FL 33147							
						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualified 10/29/1992	
2. Principal P	2. Principal Place of Business 2a. Mailing Address				4. FEI Number Applied Fol		Applied For
21	26					65-0365237	Not Applicable
Suite, Apt. #, etc. Suite, Apt. 22						5 Cortificate of Status Desired 58.	75 Additional e Required
City & State	9	City & State					.00 May Be ded to Fees
Ζiρ	Country	Zip	Cou	ntry	-	8. This corporation owes or has paid the current feat	r Intangible
24	25	29	30			Personal Property Tax due June 30. Yes	No
9. Name and Address of Current Registered Agent SAVELLE, ELYSA 1234 NW 79TH ST. MIAMI FL 33147				81 Name		10. Name and Address of New Registered Agent	
				83		iss (P.O. Box Number is Not Acceptable)	
44 D	4. 45	502 1 007 1500 Florido Cha		84	City	FL 85 pration submits this statement for the purpose of changing	Zip Code
office or r	egis te red agent, or bo th, in the Sk m familiar with, and accept the ob	ate of Elorida. Such change was	s authorized	vd b	the corporation	on's board of directors. I hereby accept the appointmen	ng its registered it as registered
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable (Ni	O1E: Registered	Ager	nt signature require	d when roinstating) DATE	
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS IN 12
TITLE	D	☐ DELETE	1.1 1 1	ΓLE		Cha	nge 🔲 Addition
NAME	Savelle, Elysa		1.2 NA	1.2 NAME			
STREET ADDRESS	1234 N.W. 79TH ST.		1.3 STREET		AODRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CH	TY-ST	· ZIP		
TITLE		☐ DELETE	2 1 TIT	ILE .		☐ Cha	nge Addition
NAME			2.2 NA	2.2 NAME			
STREET ADDRESS			2 3 ST	23 STREET ADDRESS			
CITY-ST-ZIP			2. 4 CI	2. 4 CITY-ST-ZIP			
TITLE		DELETE	3.1 TIT	ιE		☐ Chai	ge Addition
NAME			3.2 NA	ME	ļ		
STREET ADDRESS			3.3 ST	REET A	ADDRESS		
CITY-ST-ZIP			3.4 CI	TY-SI	T- 21P		

CITY - ST - ZIP 6.4 CITY - ST- ZIP 14. Thereby certify that the information supplied with this filling 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 frue 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 frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address

4.1 TITLE 4 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE

62 NAME

4.3 STREET ADDRESS 4.4 CITY - ST - ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - \$1 - ZIP

DELETE

DELETE

DELETE

Change

Change

Change

Addition

Addition

Addition

FILED

Jan 26 1998 8:00am

Secretary of State