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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000002225 (0)

GENERAL BUSINESS REAL ESTATE INVESTMENT CORPORATION OF SW/FL.

•	e of Business	Mailing Addr	Mailing Address			- I BORTHOOD TO TOUGH TOUR TOURS COURS COURS COURSE SENSE ANTIMETERS SHALL FOR COURSE			
1777 TAMIAMI T		1777 TAMIAMI				{			
SUITE 400		BOX 27. SUITE	BOX 27. SUITE 400			j			
PORT CHARLOT	ITE FL 33948	PORT CHARLO	TTE FL 33948	3-1051					
US		US				3. Date Incorporated or Qualified 11/02/1992	3s. Date of 05/01/1		eport
2. Principal P	tace of Business	2a. Mailing A	deress			4. FEI Number		Ap	plied For
Same.		[26] C				65-8964459-650365549 Not Appli			Applicable
Suite, Apt. #, etc.		·	Suite, Apt. #, etc.			5. Certificate of Status Desired	× \$		dditional
22		27	·					Fee Re	·
City & State	e	City & Sta	ite			6. Election Campaign Financing	;	\$5.00	
23 Zip	Country	28 Zip		Country		Trust Fund Contribution	<u></u>	Added to	
1	25	29	<u> </u>	30		This corporation has liability for Florida Statutes	Intangible tax		199.032,
24	9, Name and Address of Cu			30]		10. Name and Address of New R			
CALL	AN, ROBERT			81	Name				·
	MURDOCK FLORIDA BANK I	RLIII DING					 		
	27, 1777 TAMIAMI TRAIL	SOLDING		82	Street Add	lress (P.O. Box Number is Not Accepta	ible)		
	T CHARLOTTE FL 33948			63					
1 011	I CIPAROTTE I E OCOTO								
				84	City		FL 8	5 Zip C	ode
11. Pursuant	to the provisions of Sections 607	7.0502 and 607.1508, F	lorida Statute	s, the above	named corr	poration submits this statement for the	nurnose of cha	nging its	registered
office or r	registered agent, or both, in the	State of Florida, Such of	hange was at	uthorized by	the corpora	ation's board of directors. I hereby acce	opt the appoint	ment as I	egistered
agent 1 a	im tamiliai wiiri, and accept me t	ongations of section b	<i>ו</i> טר.עסטס, רוטו	ทบส อเสเนเซร					
SIGNATURE	Standure, typed or printed name of register	ed agers and tile if applicable		Registered Ager	t algonature requi	lired when reinstating)	DATE		
SIGNATURE	Signature, type for printed name of register OFFICERS	od agent and tile if applicable S AND DIRECTORS		Registered Ager	t aignature requi	ired when reinstating) ADDITIONS/CHANGES TO OFF		RECTOR	S IN 12
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SIGNATURE:

appears in Block 12 or Block 13

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-10-97

941-255-9100

FILED

May 01 1997 8:00am

Secretary of State

1 HEDINADI KAR 1918 NAKA BADIK EDIKI BADIN DENIN BONG KARA NUBIK NADIN BADIN 1860

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