


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

PROFIT CORPORATION ANNUAL REPORT 06-1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # P 93 0000 13903 (8)
1. Corporation Name
PRAIRIE REALTY, INC.

APPROVED
AND
FILED

1997 NOV - 6 AM 11: 04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business: 1111 KANE CONCOURSE STE 400
BAY HARBOR ISLANDS, FL 33154
Mailing Address: 1111 KANE CONCOURSE STE 400
BAY HARBOR ISLANDS, FL 33154

3. Date Incorporated or Qualified 02/15/1993
3a. Date of Last Report 10/27/1995

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 65-0484584 5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No
---	--	--

9. Name and Address of Current Registered Agent

NEMETH, GABRIEL P
1111 KANE CONCOURSE STE 400
BAY HARBOR ISLANDS, FL.
33154

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation 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 607.0505, Florida Statutes.

SIGNATURE

Signature Typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent's signature required when reinstating)

DATE

10/6/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	11 TITLE	12 NAME
STREET ADDRESS	CITY-ST-ZIP	13 STREET ADDRESS	14 CITY-ST-ZIP
TITLE	NAME	21 TITLE	22 NAME
STREET ADDRESS	CITY-ST-ZIP	23 STREET ADDRESS	24 CITY-ST-ZIP
TITLE	NAME	31 TITLE	32 NAME
STREET ADDRESS	CITY-ST-ZIP	33 STREET ADDRESS	34 CITY-ST-ZIP
TITLE	NAME	41 TITLE	42 NAME
STREET ADDRESS	CITY-ST-ZIP	43 STREET ADDRESS	44 CITY-ST-ZIP
TITLE	NAME	51 TITLE	52 NAME
STREET ADDRESS	CITY-ST-ZIP	53 STREET ADDRESS	54 CITY-ST-ZIP
TITLE	NAME	61 TITLE	62 NAME
STREET ADDRESS	CITY-ST-ZIP	63 STREET ADDRESS	64 CITY-ST-ZIP

REINSTATEMENT
900002341859-4
-11/07/97-01095-004
*****8.75 *****8.75
900002341859-4
-11/07/97-01095-005
*****15.00 *****15.00

14. I do 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