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

**PROFIT** CORPORATION ANNUAL REPORT

1998



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P93000036306 (7) DOCUMENT #

Principal Place of Business	Mailing Address	
10 S ADAMS ST 2-D SARASOTA FL 34236 US	8432 PALM LAKES CT Sarasota FL 34236 US	

FILED Apr 13 1998 8:00am Secretary of State

ACTION REALTY, INC. DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified *05/19/1993* 4. FEI Number Applied For 21 5200 OCEAN BLVD 65-0451237 Not Applicable 26 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be LORIDA 23 SAPASOTA Trust Fund Contribution Added to Fees 28 Country Country ZID 8. This corporation owes or has paid the current year Intangible 24 34242 USA 29 30 Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name MATUSIAK, DANIEL 8432 PALM LAKES COURT 62 Street Address (P.O. Box Number is Not Acceptable) SARASOTA FL 34243 83 City 84 65 Zip Codo 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutos, 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 hame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE ... Change \_\_\_ Addition TITLE 1.1 TITLE MATUSIAK, DANIEL 1.2 NAME NAME 8432 PALM LAKES COURT STREET ADDRESS 1.3 STREET ADDRESS **SARASOTA FL 34243** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 217/11/ TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY-ST-ZIP CITY-ST-ZIP TITLE DELETE 3.1 THILE Change Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 C(TY - \$1 - Z(P CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition 6.1 TITLE Change TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS

CITY-ST-ZIP 64 CITY-ST-ZIP 14. Thereby 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 suppliemental 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.

CICNATURE

4-1-98