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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham 🖝

FILED

May 19 1998 8:00am

Secretary of State

DIVISION OF CORPORATIONS

<u>1998</u>

DOCUMENT # P93000044172 (3)

AAA REALTY OF FLORIDA COMMERCIAL REAL ESTATE PROPERTIES AND INVESTMENTS, INC.

Principal Place of Business Mailing Address 132 S. ATLANTIC AVE 132 S. ATLANTIC AVE DAYTONA BOH, FL 32118 DAYTONA BCH. FL 32118 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 06/16/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 59-3189357 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 Trust Fund Contribution 28 Country Zip Country 8. This corporation owes or has paid the current year Inlangible Yes ☐ No Personal Property Tax due June 30. 24 25 29 g. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 ELBADRAMANY, FADEL 132 S. ATLANTIC AVE 82 Street Address (P.O. Box Number is Not Acceptable) DAYTONA BCH. FL 32118 83 В4 City Zip Code 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 prioteo name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. Addition DELETE Change 1.1 TITLE TITLE **ELBADRAMANY, FADEL** NAME 1.2 NAME 132 S. ATLANTIC AVE STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL 1.4 City-ST-ZIP CITY-ST-ZIP Addition DELETE Change TITLE 2.1 TITLE 2.2 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE Change ■ Addition 3.1 TITLE TITI F NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change ☐ Addition TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CHY-ST-ZIP DELETE Addition 61111LE TITLE 6.2 NAME NAME **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY - ST - ZIP 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 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 tryatee 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 attaching that a haddress.