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

PROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

1. Corporation Name # P93000056468 (0)  AHOY REALTY OF SOUTHWEST FLORIDA, INC.													
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Dringing Plac	- of Pusines												
Principal Place of Business				Mailing Address				7.001/001/001/001		1771 <b>781-</b>			
909 SE 47TH TERR. #105				909 SE 47TH TERR. #105									
CAPE CORAL FL 33904				CAPE CORAL FL 33904					DO NOT WRITE IN THIS SPACE				
1									3. Date Incorporated of	or Qualified			
2. Principal P	lace of Busi	nace	1 00	2a, Mailing Address					08/09/1993 4. FEI Number				
21		26					65-0432061				pplied For ot Applicable		
Suite, Apt. #, etc.				Suite, Apt. #, etc.							r-1		Additional*
22				27					5. Certificate of Status	Desired			equired
City & State				City & State					6, Election Campaign	Financing	_	\$5.00	May Be
23				28					Trust Fund Contribu				to Fees
Zip <b>24</b>	Country 25		29	Zip		Country 30			8. This corporation ow	-			_ ~
g, Name and Address of Curre							•	Personal Property Tax due June 30. XX Yes Li					No
so	ONY S		81	Name									
1111 SE 16TH STREET							Street	Addre	ss (P.O. Box Number is N	ot Acceptet	പ്പ	<del> </del>	
CAI					011001	Total out (1.5. Box Hallison to Hot Acceptation)							
				•			City		FL 85 Zip Ci				Code
11, Pursuant t	to the provis	ions of Sections 6	307.0502 and 6	607.1508, Florio	a Statutes	, the above	-named	i corpo	ration submits this statern	ent for the p	ouroose of	f changing i	ts registered
office or re agent. I at	egistered ag m familiar w	ent, or <b>b</b> oth, in th ith, <b>and a</b> ccept th	ie State of Flori ie obligations c	ida. Such chang of, Section 607.0	ge was aut 0505, Florid	thorized by da Statutes	the cor	poralio	on's board of directors. I h	ereby accer	ot the app	ointmont as	registered
SIGNATURE		•			,								
	Signature, typed	or printed name of regi			(NOTE: F		nt signature	e required	1 when reinstating)		DATE		
12.	ρ	OFFICE	RS AND DIRE	ND DIRECTORS  DELETE			13. 1.1 TITLE		ADDITIONS/CHANGE	S TO OFFIC	CERS AND	DIRECTOR Change	RS IN 12 Addition
NAME	•	ANTHONY S		- October			1.2 NAME		•	-		LI CHAINE	NOOHOI)
STREET ADDRESS 111 SE 16TH STREET									504 SE 2	THE P	LAC	۶	
CITY-ST-ZIP		ORAL FL				14 CITY - S		- CA.		•		904	
TITLE				☐ DE	ETE	2.1 TITLE		V			•	Change	Addition
NAME							2.2 NAME SC		zio, nicho	LAS.	4.		•
STREET ADDRESS						2.3 STREET	ADDRESS		LI SUS HETA	STR			
CITY-ST-ZIP					576	2.4 CITY-S	1- ZIP	CI	ape coral,	<u>FL</u>	3	3914	*
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STREET ADDRESS CITY-ST-ZIP						3.3 STREET		İ					
TITLE				☐ D£I	ETE	3.4. CITY-S 4.1 TITLE	1-20					Change	Addition
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CITY-ST-ZIP	_					4.4 CITY-ST	r-zip						ļ
TITLE	_		· · · · · · · · · · · · · · · · · · ·	☐ DEL	ETE	5.1 TITLE						Change	Addition
NAME						5.2 NAME		ļ					
STREET ADDRESS						5.3 STREET	ADDRESS	•					
CITY-ST-ZIP				T or	rrc ·	5.4 CITY - ST	r-ZIP	ļ				T-1 o:	·· <b>   </b>
TITLE NAME				DEL	CIC	6.1 TITLE		1				L Change	Addition
STREET ADDRESS						6.2 NAME	ADDD500	:					
CITY-ST-ZIP						63 STREET							
	ortific that the	information runs	oliod with this f	filing does not s	walifu far t	64 CITY-ST	* Z F	L		00.4.4.		116 II III	. , ,

i nereby 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 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 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 a stephinent with an addirection.

11--100

**FILED** 

Jan 30 1998 8:00am

Secretary of State