

FILED
May 15, 1999 8:00 am
Secretary of State

05-15-1999 90008 037 ***158.75

PROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT

1. Corporation Name

TIFFANY REAL ESTATE INC

Principal Place of Business

3691 ST ROAD 580
UNIT H
OLDSMAR FL 34877
DUNEDIN FL 34698

Mailing Address

3691 ST ROAD 580
UNIT H
OLDSMAR FL 34877
DUNEDIN FL 34698

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

5/9/91

4. FEI Number

59 91 99 414

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution

\$5.00 May Be
Added to Fees8. This corporation owes the current year Intangible
Personal Property Tax.

Yes No

2. Principal Place of Business

21 1599 BRAEMOOR LN

2a. Mailing Address

26 1599 BRAEMOOR LN

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

23 DUNEDIN FL

City & State

28 DUNEDIN FL

Zip

24 34698

Country

25 PINELAS

Zip

29 34698

Country

30 PINELAS

9. Name and Address of Current Registered Agent

GRACE PAOLILLO
1599 BRAEMOOR LN
DUNEDIN FL 34698

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DAYS

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP

6 GRACE PAOLILLO
1599 BRAEMOOR LN
DUNEDIN FL

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

7

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

8

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

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DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

11

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

12

DELETE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

13

DELETE

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

Change Addition

SIGNATURE:

Grace Paolillo

Pres.

4/29/99

Date

Daytime Phone #

CR2E034 (11/98)