FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # 1. Corporation Name

P93000070921 (0)

LA COSTA REAL ESTATE, INC.



1500 NORTH OCEAN BLUD 1500	Principal Place of Business Mailing Address				L DU ETARDI AND DUDEN DOLLO DETAT AND	II ODANI GORA ID		10119 11004 1101 1001			
10/12/1983 04/22/1985 10/12/1985 04/22/1985 10/12/1985 04/22/1985 10/12/1985 10/	1504 NORTH OCEAN BLVD.			1504 NORTH OCEAN BLVD.							
Sale							10/12/1993				
Solic April #, etc.		ce of Business	├ ─┐ ~							Applied For	
27			·				65-0462367			Not Applicable	
Coly A State Country 28 Country 29 Coun		, etc	₁	Suite, Apt. #, etc.			5. Certificate of Status Desired		•		
26				City & State			& Floation Campaging Floating				
Zep	23		— ·								
10, Name and Address of New Registered Agent		Country	Ζφ	Country			8. This corporation has liability for in	ntangible tax			
SOLKOVITS, LOIS M 1504 NORTH OCEAN BLVD. POMPANO BEACH FL 33062 80 80 80 80 80 80 80 80 80 8	24						Florida Statutes Yes No				
SOLKOVITS, LOIS M 1504 NORTH OCEAN BLVD. POMPANO BEACH FL 33082 88		9. Name and Address of Currer	nt Registered Agent		: T	* I	10. Name and Address of New R	gistered A	gent		
1504 NORTH COEAN BLVD. 28 37 37 37 37 37 37 37 3	COLVO	MTC LOIC M		ľ	'	Name					
POMPANO BEACH FL 33082				82	2	Street Addres	s (P.O. Box Number is Not Acceptabl	9)			
Bab City FL Bit Zir Code	1			8	3						
11. Pursuant to the provisions of Socions 607.0502 and 607.1508. Florida Statutins, the above named corporation submits this statement for the purpose of changing its registered officing or registered agent, or both in the Statis of Florida. Such change was audiorized by the corporation's board of discours. I hereby accept the appointment as registered agent. I am from the composition of th	10,,,,	NO DESCRITE GOODE									
11. Pursuant to the provisions of Socions 607.0502 and 607 508. Finanda Statutus is above, named corporation submits this statement for the purpose of changing, its registered office or registered agent, no floring its part of changing was auctionized by the corporation's board of directors. Thereby accept the appointment as registered agent if an accept the obligations of, Socion 607.0505, Florida Statutes SIGNATURE				84	4	City		EI.	85 Z	ip Code	
12.	familiar with	o agent, or both in the State of Flori and accept the obligations of, Sect	our Surn enange was autho ton 607.0505, Florida Statut	rized by the con es	bör	ration's board	of directurs. I hereby accept the appo	intment as re	ging its i igistered	registered office d agent I am	
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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, Fiorida Statutes, and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DETED