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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000072681 (8)

PREMIER REALTY & MANAGEMENT, INC.

**8022 LANDGROVE COURT** 

ORLANDO FL 32819

Principal Place o	of Business	Mailing Address			
3160 VINELAND KISSIMMEE FL : US	ROAD STE ONE 34746	3160 VINELAND ROAD STE ONE KISSIMMEE FL 34746 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified  10/14/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-3208801	Not Applica
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	This corporation owes or has paid the operational Property Tax due June 30.	current year Intangible
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Registere	d Agent
VATE	C CANDDA I		81 Name		

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

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

agent. I am familiar with, and accept the obligations of Section 607 0505. Florida Statutes.							
SIGNATURE			YATES 1/26/98				
		<u> </u>	e required when reinstating) DATE				
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PST DELETE	1.1 TITLE	ST				
NAME	YATES, SANDRA J	1.2 NAME	SANDRA J. YATES				
STREET ADDRESS	8022 LAND GROVE CT	1.3 STREET ADDRESS	BIIZ S. SEMORAN BLUB. # C				
CITY-ST-ZIP	ORLANDO FL	1.4 CITY-ST-ZIP	SANDRA J. YATES 3112 S. SEMORAN BLUD. # 2 ORLANDO, FL 32822				
TITLE	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition				
NAME		2.2 NAME					
STREET ADDRESS		2.3 STREET ADDRESS					
CITY-ST-ZIP		2. 4 CITY - ST - ZIP					
TITLE	DELETE	3.1 TITLE	Change Addition				
NAME .		3.2 NAME					
STREET ADDRESS		3.3 STREET ADDRESS					
CITY-ST-ZIP		3 4. CITY-ST-ZIP					
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition				
NAME		4. 2 NAME					
STREET ADDRESS		4.3 STREET ADDRESS					
CITY-ST-ZIP		4.4 CITY-ST-ZIP					
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition				
NAME		5.2 NAME					
STREET ADDRESS		5.3 STREET ADDRESS					
CITY-ST-ZIP		5.4 CITY-ST-ZIP					
TITLE	☐ DELETE	6.1 TITLE	Change Addition				
NAME		6.2 NAME					
STREET ADDRESS		6.3 STREET ADDRESS					

14. I hereby 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 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.

6.4 CITY - ST - ZIP

**FILED** 

Mar 05 1998 8:00am

Secretary of State

Applied For Not Applicable

Zip Code