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 # P9400003848 (6) RON REAL ESTATE, INC.				
Principal Place of Business C/O GUTTER JOSEPHER 100 WEST CYPRESS CREEK ROAD.STE 900 FT. LAUDERDALE FL 33309 US		Mailing Address C/O GUTTER JOSEPHER 100 WEST CYPRESS CREEK ROAD, STE 900 FT. LAUDERDALE FL 33309 US		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified
				01/14/1994
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For 65-0466276 Not Applicable
Suite, Apt. #, etc		Suite, Apt #, etc		5. Certificate of Status Desired S8.75 Additional
22		27		Fee Required
City & State		City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	7 _(p)	Country	8. This corporation owes or has paid the current year Intangible
24	25	29	30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent
GUTTER, MARVIN C 100 WEST CYPRESS CREEK RD SUITE 900 FT. LAUDERDALE FL 33309				t Address (P.O. Box Number is Not Acceptable)
			84 City	FL 85 Zip Code
11. Pursuant to the provision, of Sections 607 05:02 Aki 607 15:08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agoit, or both, in the Section 15:04 Such Joriga was authorized by the corporation's board of directors. I hereby accept the appointment as registered agont. The provision of Section 15:05 Statutes. SIGNATURE Symbol Speed or product have of registered agont installed applicable. INSTE. Registered Agent signature required when reinstating) DATE				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TATLE	D Gavsie, Mrs. Ronnie	[_] DELETE	1.1 TITLE	Change Addition
STREET ADDRESS	RESS C/O 100 WEST CYPRESS ROAD, STE 900		1.2 NAME 1.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	T perese	1.4 CITY-ST-ZIP	
TITLE NAME		☐ DECETE	21 TITLE 2.2 NAME	Change Addition
STREET ADORESS			2.3 STREET ADDRESS	
CITY-S1-ZIP			2.4 CITY-\$T-ZIP	
TITLE		DELETE	3.1 TITLE	Change Addition
NAME			3.2 NAME	1
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP TITLE		DELETE	34. CITY-ST-ZIP	Change Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREE1 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		I procee	5 4 CITY-ST-ZIP	Change Addition
TITLE NAME		☐ DELETE	61 TITLE	Change L Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS	

14. I hereby certify that the information supplied with this hing 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 suppliemental 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.

SIGNATURE

FILED

Feb 09 1998 8:00am

Secretary of State