SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/8/95: $225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $375)

PROFIT CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 30 AM 9:38

DOCUMENT # P94000014323 (7)

1. Corporation Name
REALTY PEOPLE, INC.

Principal Place of Business: ~~4990 NORTHWEST 102 AVENUE~~ UNIT 107 ~~MIAMI FL~~ 33178

Mailing Address: ~~4990 NORTHWEST 102 AVENUE~~ UNIT 107 ~~MIAMI FL~~ 33178

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/22/1994
3a. Date of Last Report:

4. FEI Number: 65-0469640 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required

6. ☐ — $5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business
21 9752 NW 49 Terr
22 Suite, Apt. #, etc.
23 City & State: Miami FL
24 Zip: 33178
25 Country: USA

2a. Mailing Address
26 9752 NW 49 Terr
27 Suite, Apt. #, etc.
28 City & State: Miami FL
29 Zip: 33178
30 Country: USA

9. Name and Address of Current Registered Agent

LAW FIRM OF LAWRENCE J. ~~SPIEGEL CHARTERED~~
3436 ALMERIA ~~AVENUE~~
~~CORAL GABLES~~ FL 33134

10. Name and Address of New Registered Agent

81 Name: Anthony P. Abolila
82 Street Address (P.O. Box Number is Not Acceptable): 9752 NW 49 Terr
83
84 City: Miami FL 85 Zip Code: 33178

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] Anthony P. Abolila 6/9/95

12. OFFICERS AND DIRECTORS		13.		
TITLE	P	1 TITLE		☒ Change ☐ Addition
NAME	ABOLILA, ANTHONY P	1 NAME		
STREET ADDRESS	~~4990 NORTHWEST 102 AVENUE, UNIT 107~~	1 STREET ADDRESS	9752 NW 49 Terr	
CITY, ST, ZIP	MIAMI FL 33178	1 CITY, ST, ZIP		
TITLE		2 TITLE		☐ Change ☐ Addition
NAME		2 NAME		
STREET ADDRESS		2 STREET ADDRESS		
CITY, ST, ZIP		2 CITY, ST, ZIP		
TITLE		3 TITLE		☐ Change ☐ Addition
NAME		3 NAME		
STREET ADDRESS		3 STREET ADDRESS		
CITY, ST, ZIP		3 CITY, ST, ZIP		
TITLE		4 TITLE		☐ Change ☐ Addition
NAME		4 NAME		
STREET ADDRESS		4 STREET ADDRESS		
CITY, ST, ZIP		4 CITY, ST, ZIP		
TITLE		5 TITLE		☐ Change ☐ Addition
NAME		5 NAME		
STREET ADDRESS		5 STREET ADDRESS		
CITY, ST, ZIP		5 CITY, ST, ZIP		
TITLE		6 TITLE		☐ Change ☐ Addition
NAME		6 NAME		
STREET ADDRESS		6 STREET ADDRESS		
CITY, ST, ZIP		6 CITY, ST, ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(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.

SIGNATURE: [signature] 6/9/95 (305) 640-9973
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Anthony P. Abolila

CR2E034 (3/95)