

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

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P94000023023 (2)

1. Corporation Name

REALTY STREET, INC.

APPROVED
AND
FILED

95 APR 25 AM 8:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

5601 COLLINS AVE.
SUITE M-100
MIAMI BEACH FL 33140

Mailing Address

5601 COLLINS AVE.
SUITE M-100
MIAMI BEACH FL 33140

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

03/24/1994

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 555 NE 15 St., #100

4. FEI Number

65-0478247

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 Fees

6. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☒ No

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CORPORATION INFORMATION SERVICES INC.
1201 HAYS ST.
TALLAHASSEE FL 32301

81 Name

John A. Ritter

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

555 NE 15 St., Suite 100

83

84 City Miami

FL

85

Zip Code 33132

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

John A. Ritter

(Signature, typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DPS
RITTER, JOHN
5601 COLLINS AVE., SUITE M-100
MIAMI BEACH FL 33140

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
DVT
HARTNETT, ROBERT
5601 COLLINS AVE., SUITE M-100
MIAMI BEACH FL 33140

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

555 NE 15 St., Suite 100

1.4 CITY - ST - ZIP

Miami, FL. 33132

2.1 TITLE

☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

555 NE 15 St., #100

2.4 CITY - ST - ZIP

Miami, FL. 33132

3.1 TITLE

☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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(3)(k), 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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John A. Ritter

DATE

1/20/95

Signature Printed