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

CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000036329 (8)

FILED Mar 10 1998 8:00am Secretary of State

1. Corporation	HOUSE POINT REALTY, IN	IC.	(0)		186 11118 81188 ANN 11818 1811 1861
Principal Place	of Businoss	Mailing Address			HAD INNO BINDO INNO NORTE DAN KADI.
2410 N. FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33084		2410 N. FEDERAL HIGHWAY LIGHTHOUSE POINT FL 33064		DO NOT WRITE IN TH	IIC CDACE
US		U\$		3. Date Incorporated or Qualified	IIS SPACE
				05/13/1994	
2. Principal Pla	ace of Business	2s. Mailing Address		4. FEI Number	Applied For
21		26		65-0490444	Not Applicable
Suite, Apt #	i, otc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
	g. Name and Address of Current	t Registered Agent	641 11	10. Name and Address of New Register	ed Agent
	ILLER, BARBARA		81 Name		:
	21 NE 35TH STREET		B2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
LH	OHTHOUSE POINT FL 33064		83		
			88		
			84 City	F	85 Zip Code
dd Durguant t	the provinces of Sections 507.01.03	2 and CO7 150B Florida Ci	latutas the should period as		
agent. i an SIGNATURE	igistered agent, or both, in the State in familiar with, and accept the obligation of the state	ations of, Section 607,0505	vas authorized by the corpor b, Florida Statutes. (NOTE Registered Agent signature reg	proration submits this statement for the purpos ation's board of directors. I hereby accept the statement when reinstation?	i
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS A	<u> </u>
TALE	PD	DELETE		Noomono, or who are to or the criteria.	Change Addition
NAME	MILLER, BARBARA		1.2 NAME		
STREET ADDRESS	2221 NE 35TH STREET		1.3 STREET ADDRESS		
CITY-ST-ZIP	LIGHTHOUSE POINT FL		1.4 CITY+ST-ZIP		
TITLE		DELFTE	21 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		☐ DELFTE	4.1 TOTLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		The second of the second
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5 2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		☐ Change ☐ Addition
TITLE		רין טנונוננ			TT CHANGE TT MODITION
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-S1-ZIP		

Thereby 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 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 change for on an attachment with an address.

3/3/98