

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

**PROFIT
CORPORATION
ANNUAL REPORT
1996**



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

DOCUMENT # P94000036806 (5)

1. Corporation Name

"BUY THE AMERICAN DREAM" REALTY, INC.

Principal Place of Business

**5020 GUNN HIGHWAY
SUITE 220-C
TAMPA FL 33624**

Mailing Address

**P.O. BOX 271691
TAMPA FL 33688**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 4111 Hwy. 41, Suite 303-Q		26 P.O. Box 2215		05/16/1994		08/10/1995	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number		Applied For	
22 Suite 303-Q		27		59-3243356		Not Applicable	
City & State		City & State		5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
23 L O' L, Florida		28 Land O' Lakes, FL		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24 34639		25 Pasco		29 34639		30 Pasco	

9. Name and Address of Current Registered Agent

**HORVATH, SYNTHIA
5020 GUNN HIGHWAY
SUITE 220-C
TAMPA FL 33624**

10. Name and Address of New Registered Agent

81 Name	Horvath, Synthia
82 Street Address (P.O. Box Number is Not Acceptable)	4111 Hwy. 41
83	Suite 303-Q
84 City	Tampa
85 Zip Code	FL 34639

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 607.0503, Florida Statutes.

SIGNATURE *Synthia Horvath*

SYNTHIA HORVATH

1/25/96

(NOTE: Registered Agent signature required at filing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPST	1.1 TITLE	DPST
NAME	HORVATH, SYNTHIA	1.2 NAME	HORVATH, SYNTHIA
STREET ADDRESS	5020 GUNN HIGHWAY, SUITE 220-C	1.3 STREET ADDRESS	4111 Hwy. 41, Suite 303-Q
CITY - ST - ZIP	TAMPA FL 33624	1.4 CITY - ST - ZIP	Tampa, FL., 34639
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		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 registered 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 to an address.

SIGNATURE: *Synthia Horvath* **SYNTHIA HORVATH, President**

(813) 996-0506
January 25, 1996

(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR)

CR2E034 (12/95)