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

PROFIT



ELODIDA DEDADTMENT DE CTATE

ANNL	CORPORATION ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS							
 Corporation 	MENT # P94(Name REALTY, INC.	00003914	17 (1)			i derivedi hir irini rini reni de	III 0 011) 0 018 0116 1 0 19	: (1844 81811 1844 1844
Principal Place	of Rusings	B.B. Y	·					
Principal Place of Business C/O ROBERT RAESSLER 3025 ROYAL PALM WAY MIAMI FL 33140 US Mailing Address C/O JOHN C SCHNE 515 NORTH FLAGLEF W PALM BEACH FL 30140 US				R DR.		Date Incorporated or Qualified		
2. Principal Pia	on of Rucinose	TAT WALLEY				05/19/1994	04/18/	1995
21	ice of business	2a. Maling A	odress			4. FEI Number 65-0571959	-	Applied For
Suite, Apt. #	, etc.	Suite Api	. #, etc.				\$8.	Not Applicable 75 Additional
22		27		···- ·······		5. Certificate of Status Desired		ee Required
City & State		Oity & Sta	ite			Election Campaign Financing Teach Found Coats to the coats		.00 May Be
Zip	Country	Zip		Country		Trust Fund Contribution 8. This corporation has liability for	A0	ided to Fees
24	25	29	3	0		Florida Statutes 🔲 Ye	s ∐No	s (88.032,
	9. Name and Address of Co	urrent Registered Age	nt			10. Name and Address of New	Registered Agent	
SCHNE	DER, JOHN C			81	Name			
	RTHBRIDGE PAVILION			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)	
515 NOF	RTH FLAGLER DR.			83				
W PALM	BEACH FL 33414							
				84	City		FL 65	Zip Code
				the above r	samed corpo	ration submits this statement for the purel of directors. Thereby accept the app	irpose of changing i	ts registered office
	n, and accept the obligations of,	Section 607.0505, Florid	ia Statutes.	,		The state of the s	somment do registo	red agont. Fam
SIGNATURE _	lignatine, typed or perited han elot regetered	Lagrentian Little if applicable	(NOTE F	sajestered Ager	! Syffial are regard	ed where revistatings	DATE	
12.	OFFICERS DPT	AND DIRECTORS		13.	·	ADDITIONS/CHANGES TO OF	ICERS AND DIREC	TORS IN 12
TITLE NAME	RAESSLER, ROBERT V	[][ELETE.	1 1 TIBLE		P	Chan	ge 🔲 Addition
STREET ADDRESS	3025 ROYAL PALM WAY			1.2 NAME	K	ressler Robert Das Royal Palm M	V .	
CITY-ST-ZIP	MIAMI BEACH FL			13 STREET 14 CITY - SI		iami Beachiec 2		
TITLE	VPS		ELFIE	2 1 TITLE		1471 DENCHITC C	Chan	ge
NAME	RAEESLER, CHRISTOPHI	er r	ľ	2.2 NAME	Ř	ABSSLER . CHRISTOP	HER K	32
STREET ADDRESS	420 LINCOLN ROAD			23 STREET.	ADDRESS 📲	ol winden Road, Su	ite 104	
CITY-ST-ZIP	MIAMI BEACH FL VPD			2.4 CITY - \$1	1-7IP	liami Boach , FC	33139	
TITLE NAME	LIVINGSTONE, BARRIE H	INWARN	ELETE	3 1 TITLE	V	ru	La unang	je 🔲 Addition
STREET ADDRESS	420 LINCOLN ROAD	OTAID		3.2 NAME		VIN65TONE BARRI		D
CITY-ST-ZIP	MIAMI BEACH FL			3.4 City - St		ol Lincoln Road, Sui		
TITLE	D	D	ELETE	4 1 TITLE		igni Boach, FC 3	Chang	ge [Addition
NAME	RAESSLER, ANITA L			4.2 NAME				
STREET ADDRESS	3025 ROYAL PALM AVEN	IUE		4.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI FL		C. ETC	4.4 CHTY - ST	- ZIP			
THILE NAME			titlt	5 'THILE	Ä	· · · · · · · · · · · · · · · · · · ·	☐ Chang	e Addition
STREET ADDRESS				5.2 NAME		UZHADI ANDRES CO OI CINION ROAD!	Suite 10	વ
CITY-ST-ZIP				5.3 STREET A	710	iami Beach IPL	Z2134	•
TITLE		0	ELETE	5 4 CITY-ST 6 1 TITLE	- ZIP' - T	1941 BLACK LEC	SS137	e Addition
NAME				6.2 NAME			[] Cuang	∾ □ vaquion

14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not quarify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on his armuel report or supplemental armuel 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 directly of his corporation or the province of trustee propowers to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 or or great on a state of early of the analyses.

5.3 STREET ADDRESS

6 4 CITY - ST - ZIP

SIGNATURE:

STREET ADDRESS

CITY - ST- ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)