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

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P94000047154 (7)

FILED May 15 1998 8:00am Secretary of State

812 94876011

| LARREA | AU REALTY, INC. | | | | |
|--|---|--|--|---|-----------------------------------|
| Principal Place | e of Business | Mailing Address | | T 10 DELLA PROPERTO (THE VALUE OF LEASE OF THE PROPERTOR | IBS: 16001 14001 OHII DIÐI (DÐI |
| 1900 LAND O | LAKES BLVD | 1900 LAND O LAKES BLVI #117 | | | |
| LUTZ FL 33549 LUTZ FL 33549 | | | | DO NOT WRITE IN THE | S SPACE |
| US | | U\$ | | 3. Date Incorporated or Qualified | ļ |
| 5 5 - - - - - - - - - - | | | ······································ | 06/17/1994 | |
| 21 215 | ace of Business | | lory Rd | 4. FEI Number 59-3258302 | Applied For Not Applicable |
| Suite, Apt. 1 | #, etc. O | Suite, Apt. #, etc. | 0 | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & State | tz H | City & State | 20 | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zig | Country | Zip | Country | 8. This corporation owes or has paid the o | |
| 24 <i>335</i> | 49 25 HUSCO | ²⁹ 33549 3 | n Hasco | Personal Property Tax due June 30. | Yes No |
| | 9. Name and Address of Current | Registered Agent | | 10. Name and Address of New Registere | d Agent |
| LAF | RREAU, SUE L | | 81 Name | | İ |
| 1900 LAND O LAKES BLVD SUITE 121 LUTZ FL 33549 | | | | ress (P.O. Box Number is Not Acceptable) | |
| | | | | | |
| | | | 84 City | F | 85 Zip Code |
| 11. Pursuant t | o the provisions of Sections 607 0502 | and 607 1508 Florida Statutes | s, the above-named cor | poration submits this statement for the purpose | |
| office or re | egistered agent, or both, in the State on familiar with, and accept the obligat | if Florida. Such cha nge was a u | thorized by the corpora | ation's board of directors. I hereby accept the a | ppointment as registered |
| SIGNATURE . | Signature Sport or points of course of competences and | | Rogistored Agent signature requ | | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFFICERS A | ND DIRECTORS IN 12 |
| TITLE | B | DETELE | 1.1 TrILE | Larreau Sue. L | Change |
| NAME | LARREAU, SUE L | IITE 101 | 1.2 NAME | 21509 Glora Rd | Į. |
| STREET ADDRESS | 1900 LAND O LAKES BLVD SU LUTZ FL | JIIE 121 | 1.3 STHEET ADDRESS | 21509 blorg Rd | J |
| CITY-ST-ZIP | LOIZ FL | DELETE | 2.1 TiftE | m 2 5 355 97 | Change Addition |
| NAME | | | 2.2 NAME | | |
| STREET ADDRESS | | | 2.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 2. 4 City - St - ZIP | | Ì |
| 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 | | ☐ DELETE | 4.1 TITLE | | Change Addition |
| NAME | | | 4. 2 NAME | | ļ |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | DELETE | 4.4 CHY-S1-7IP | | Change Addition |
| TITLE | | □ DELETÉ | 51 TIPLE | | L Change L Addition |
| NAME CONTEX ADDRESS | | | 5.2 NAME | | 3 -> |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | 515 |
| CITY-ST-ZIP TITLE | | DELETE | 54 CITY-ST-7IP 6.1 TOLE | | Change Addition |
| NAME | | | 6.2 NAME | 1000025274 -05/18/98010760 | 21 |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | -05/18/98010760 | 020 |
| City-St-ZIP | | | 6.4 City-St-ZiP | *** 15 0.00 | |
| 14. I hereby c | ertify 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 of officer or o | on this annual report or supplemental | annual report is true and accu ver or trustee empow ered to e x | rate and that my signat | ure shall have the same legal effect as if made quired by Chapter 607, Florida Statutes; and that | under oath; that I am an |