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 # 1. Corporation Name P94000050723 (3)

BALLANTRAE HOME SALES, INC.

	1101112	0,420,	1110	

FILED Mar 13 1998 8:00am Secretary of State



Principal Plac	ce of Busines	is .	М							
1800 SOUTH AUSTRALIAN AVENUE 1800 SOUTH AUSTRALIAN A SUITE 400 SUITE 400 W PALM BEACH FL 33409 W PALM BEACH FL 33409						UE		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified		
								07/08/1994		
2. Principal F	Place of Busin	ness	2a.	. Mailing Address	Iress			4. FEI Number Applied For		
21			26					22-3312524 Not Applicable		
Suite, Apt.	#, etc.		<u></u>	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional		
22 City & Stat			[27]	City & State			·	Fee Required		
23 28			ony a diane				6. Election Campeign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Žip		Country		Zip Country		· · · · · · · · · · · · · · · · · · ·	This corporation owes or has paid the current year Intangible			
24 25 29 30		30	Personal Property Tax due June 30. Yes No							
		and Address of C	arrent Regis	tered Agent		10. Name and Address of New Registered Agent				
	RANNOCK,					81 Name				
		STRALIAN AVE.				B2	Street Ad	dress (P.O. Box Number is Not Acceptable)		
	JITE 400 PALM REA	CH FL 33409				83				
"	CUDM DEV	01116 00709								
						84	City	FL 85 Zip Code		
11. Pursuant office or r	to the provis	ions of Sections 607 jent, or both, in the th, and accept the	.0502 and 6 State of Florid	07.1508, Florida St da. Such change w	e-named co the corpor	orporation submits this statement for the purpose of changing its registered ration's board of directors. I hereby accept the appointment as registered				
SIGNATURE	art (Q artimeat 14)	in, and accept the	anigutions of	1, 0001011 007.0500	i, i londa ota	iuies) .			
SIGNATURE	Signature, typed	or printed name of register			(NOTE: Registere	d Age	nt signature rec	quired when reinstating) DATE		
12.	<u> </u>	OFFICERS	AND DIREC		13.		······································	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D HOVAJA	NIAN, KEVORK S		L_] DELETE	1.1 Ti			☐ Change ☐ Addition		
NAME CERTET ADDOCCO	362 VIA				1.2 N					
STREET ADDRESS		BEACH FL					ADDRESS			
CITY-ST-ZIP TITLE	D			DELETE	1.4 U 2.1 TI	ITY-S TLF	1-ZIP	☐ Change ☐ Addition		
NAME		NIAN, ARA K			2.1 N			C Change D Addition		
STREET ADDRESS 61 WHIPPORWILL VALLEY RD.		Y RD.	2.3 STREET ADD		ADDRESS					
CITY-ST-ZIP		IC HIGHLANDS N					ST-ZIP			
TITLE	P			☐ DELET E	3.1 TI		'' • "	Change Addition		
NAME		NG, KARL R			3.2 N	AME		· -		
STREET ADDRESS		AUSTRALIAN AVI	E,#400		3.3 S	TREET	ADDRESS			
CITY-ST-ZIP	WEST P	PALM BEACH FL			3.4. C	ITY-S	T-ZIP			
TITLE				☐ DELETE	4.1 TI	TLE		☐ Change ☐ Addition		
NAME					4.2 N	AME				
STREET ADDRESS					4.3 ST	REET	ADDRESS			
CITY-ST-ZIP					4.4 Ci	TY-S	r-zip			
TITLE				DELETE	5.1 T	TLE		☐ Change ☐ Addition		
NAME					5.2 N/	AME				
STREET ADDRESS					5.3 S1	REET	ADORESS			
CITY-ST-ZIP					5.4 CF		r-ZIP			
TITLE				☐ DELETE	6.1 Ti		ĺ	☐ Change ☐ Addition		
NAME					6.2 N/					
STREET ADDRESS							ADDRESS			
CITY-ST-ZIP					6.4 CI	TY-SI	- ZIP			

14. I hereby 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 the receiver or true lee 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 appartaneous with any address.