## 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

DOCUMENT #
1. Corporation Name P94000071135 (5)

S & P REAL ESTATE HOLDINGS, INC.

**FILED** Feb 05 1998 8:00am Secretary of State



Principal Plac	e of Business	Mailing Address			OMBILL BALLEY LONG TIONS TINNE TREES BUTE FROM:
18167 US 19 NORTH 18167 US 19 NORTH					
		Suite 150 Clearwater FL 34624		DO NOT WEI	TE IÑ THIS SPACE
US US US				3. Date Incorporated or Qualified	
				09/26/1994	-
2. Principal P	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 2240	D BELLEAIR ROAD	26 ZZ40 BEI	LLEAIR KOAD	59-3269936	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22 160		27 SUITE (COC	>	3. Certificate of Status Desired	Fee Required
		City & State	· ~	6. Election Campaign Financing	\$ <b>5.00</b> May Be
23 CLEAR Zip	Country	28 CLEARWATES	Country	Trust Fund Contribution	Added to Fees
24 337(		29 33764	30 USA	This corporation owes or has a Personal Property Tax due Jul	
24 - 10	9. Name and Address of Curren		30 005	10. Name and Address of New I	
PΔ	ITEL, SANDIP I ESQ.		81 Name		
	167 U.S. HIGHWAY 19 NORTH		20 0 111		
HARBOUSIDE SUITE 150 CLEARWATER FL 34624				ress (P.O. Box Number is Not Accept	
			83	A - A	
-				UTTE 160	log Tropes
			84 City	EARWATER	FL 85 Zip Code 33764
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statute			purpose of changing its registered
office or re	to the provisions of Sections 607,050 registered agent, or both, in the State im familiar with, and appept the foliging	of Florida. Such change was a ations of, Section 607.0505, Flo	luthorized by the corporatorida Statutes.	tion's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE	Nas I Patet			L, DPRES,	1/28/48
	Signature, typed or printed name of registered age	nt and title if applicable. (NOT	E: Registered Agent signature requir		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	The second secon
TITLE	I I'	DELÉTE	1,1 TITLE		Change Addition
NAME	Patel, Sandip     18167 U.S. Highway 19 N. I	TYDDUIDGIDE 6 4EV	1.2 NAME		
STREET ADDRESS	CLEARWATER FL	TANDOUNSIDE S 130	1.3 STREET ADDRESS		
CITY-ST-ZIP	DV	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	AMIN, MAHESH	<u></u>	2.2 NAME		
STREET ADDRESS	18167 US 19 NORTH - SUITE	150	2.3 STREET ADDRESS		
CITY-ST-ZIP	CLEARWATER FL	. ,,,,	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		DELETE	4.3 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
			4.3 STREET ADDRESS		į
STREET ADDRESS			- 1		
STREET ADDRESS   CITY-ST-ZIP			4.4 CITY - ST - ZIP		
		☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
CITY-ST-ZIP		☐ DELETE			Change Addition
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME			5.1 TITLE 5.2 NAME		
CITY-ST-ZIP TITLE NAME STREET ADDRESS		☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		☐ Change ☐ Addition ☐ Change ☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE		