## 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 P94000072696 (5)

SELTZER REALTY, INC.

Principal Place of Business

Mailing Address

**FILED** Jan 23 1998 8:00am Secretary of State



% DOLLINGER GONSKI GROSSMAN PERMUT ONE OLD COUNTRY RD., STE. 102 CARLE PLACE, NEW YORK NY 11514		% DOLLINGER GONSKI GROSSMAN PERMUT ONE OLD COUNTRY RD., STE, 102 CARLE PLACE, NEW YORK NY 11514			:RMUT	DO NOT WRITE IN THIS SPACE.  3. Date Incorporated or Qualified  10/04/1994			
	l Place of Business	2a. Mailing Address				4. FEI Number Applied For			
21		26				11-3238994			
22	pt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & S 23	State	City & State				Election Campaign Financing     Trust Fund Contribution			
Zip <b>24</b>	Country 25	Zıp <b>29</b>	Country 30			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Registered A	gent		
	TATUM, THOMAS R		6	31	Name				
	200 East Las Olas Blvd. Suite 1800		1	32	Street Addr	ess (P.O. Box Number is Not Acceptable)			
	FORT LAUDERDALE FL 33301		1	33					
			1	34	City	FL	85 Zı	p Code	
office c	or registered agent, or both, in the State If am familiar with, and accept the oblig	e of Florida Such change was lations of Section 607.0505, F	authorized Florida Statu	by tes.	the corporat	poration submits this statement for the purpose of the sport of directors. I hereby accept the appoint when renstating)  DATE			
12,		ID DIRECTORS	13.	Agon	t signatore requir	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	DBS IN 12	
TITLE	D OFFICERS AN	DELETE	1.1 III).	F			Change		
NAME	DOLLINGER, MATTHEW		1.2 NAM						
STREET ADDRESS 1 OLD COUNTRY RD., STE. 102				1.3 STREET ADDRESS					
CITY-ST-ZIP	CARLE PLACE NY 11514		1.4 CHY-SI-ZIP		1				
TITLE	D	☐ DELETE	211111	-			Change	Addition	
NAME	Gonski, deninis m		2.2 NAM	<b>1</b> E					
STREET ADDRES	ss 1 OLD COUNTRY RD., STE.	102	2.3 STRI	EET A	ADDRESS				
CITY-ST-ZIP	CARLE PLACE NY 11514		2 4 CITY-		1- <b>Z</b> IP -			,	
TITLE	D DELETE 3			E			Change	Addition	
NAME	GROSSMAN, FLOYD G		3.2 NAM	1E					
STREET ADDRES		102	3.3 STR	EE1 A	ADDRESS				
CITY-ST-ZIP				Y-\$T	- Z(P		<b></b>	- Til 67 ee.	
TITLE		☐ DELET <b>E</b>	4.1 TITL			·	Change	e ∐ Addition	
NAME			4. 2 NAM		1000000			Į	
STREET ADDRES	SS				ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 City 5.1 HTL		- /IP		Change	Addition	
NAME		Fra Deceit	5.2 NAM			'			
STREET ADDRES	ee l				ADDRESS				
CITY-ST-ZIP	»		5.4 CITY						
TITLE		☐ DELETE	6.1 TITL		. 711		Change	Addition	
NAME		<u> </u>	6.2 NAM			•			
STREET ADDRES	ss				ADDRESS				
CITY-ST-ZIP			6.4 CITY						

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 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 with an address.