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

P94000076594 (8) DOCUMENT #

FOR SALE - MOBILE HOMES, INC.

FILED Apr 09 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									- 1 10 0 (40 0) 110 (0) 11 0 10 11 0 0 11 0 0 11 0 0 11 0	EIRI BBILI IBBI	E CHIEF BRITE II	ill a ig! 1001
4	4300 SW 64TH AVE 4300 SW 64TH AVE											
-#A2-					•							
DAVIE FL 33314					FL 33314				DO NOT WRIT	E IN THIS	SPACE	
us us									3. Date Incorporated or Qualified			
2. Principal Place of Business 2a. Mailing Address									10/17/1994 4. FEI Number			v 15
21				<u>├</u> 1	 				65-0534121			oplied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.				00 0004 12 1			ot Applicable	
22				<u> </u>	27				5. Certificate of Status Desired		φο./ο/ Fee Re	Additional
-	City & State			City & State				6. Election Campaign Financing	****		May Be	
23				28	28				Trust Fund Contribution	\Box	Added	
	Zip	Country		Zip	· · · · · · · · · · · · · · · · · · ·		untry		8. This corporation owes or has p	aid the cur		
24		25		29	29 30				Personal Property Tax due Jun	~		JNo
9. Name and Address of Current Registered Agent									10. Name and Address of New R	egistered	Agent	·
ROFFEY, ROBERT C JR							81 Name)				
4300 SW 64TH AVE							B2 Street	Addres	ss (P.O. Box Number is Not Accepta	hle)		
DAVIE FL 33314									to the Box Hamber to Het Hoodpie	.0.0,		
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							84 City			· · · · · · · · · · · · · · · · · · ·	lee l Zin /	Codo
							′			FL		Code
11	omce or n	enisteren en	ant of boar an the Sta	to of Fiorida Si	ach chanac wa	ie authoriza	d by the cor	d corpor rporation	ration submits this statement for the n's board of directors. I hereby acce	purpose of pt the app	changing it ointment as	s registered registered
agent. I am tamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes.												ŀ
SIGNATURE Signature, typed or purpled name of registered agent and little if applicable (NOTE Registered Agent signature required when reinstating) DATE												
12				ND DIRECTOR		13.			ADDITIONS/CHANGES TO OFFI		DIRECTOR	IS IN 12
i m	LE	PD			DELETE	1.1 To	TLE	Ţ		·	Change	☐ Addition
NA	WE		, robert c Jr			1.2 N	AME					
STF	EET ADDRESS	7570 SV	/ 42 PL			1.3 \$	TREET ADDRESS					
CIT	Y-ST-ZIP	DAVIE F	L			1.4 0	ITY-ST-ZIP					
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44	Lhorobi o	artifu that the	information curvation	to take alada Classica	4				nation 110 07(0)(). Flexide Castella			

with 1/is filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information that frinual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an puccy ver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in that the produces. Thereby certify that the limorniation supplier indicated on this annual report or supplier officer or director of the corporation of the Block 12 or Block 13 if changed, or proceedings of the process o

SIGNATURE: