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FILED
May 07 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000085329 (8)

1. Corporation Name

HASHEM REALTY, INC.



Principal Place of Business

2201 - 4TH ST. NORTH
SUITE A
ST. PETERSBURG FL 33704

Mailing Address

2201 - 4TH ST. NORTH
SUITE A
ST. PETERSBURG FL 33704

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/22/1994

4. FEI Number

59-3280176

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 4500 Overlook Drive NE

Suite, Apt. #, etc.

22 #210

City & State

23 ST. Petersburg, FL

Zip

24 33703

Country

25 Pinellas

2a. Mailing Address

26 4500 Overlook Dr. N.E.

Suite, Apt. #, etc.

27 #210

City & State

28 ST. Petersburg, FL

Zip

29 33703

Country

30 Pinellas

9. Name and Address of Current Registered Agent

HASHEM, CAROLYN J
2201 - 4TH ST. NORTH
SUITE A
ST. PETERSBURG FL 33704

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DPST ☐ DELETE

NAME HASHEM, CAROLYN J.
STREET ADDRESS 8385 BAHIA DEL MAR BLVD., #102
CITY-ST-ZIP ST. PETERSBURG FL

TITLE V ☒ DELETE

NAME NICHOLSON, SHARON M
STREET ADDRESS 1547 - 34TH AVE. NORTH
CITY-ST-ZIP ST PETERSBURG FL 33704

TITLE VP ☒ DELETE

NAME ROBERT D. GASCON
STREET ADDRESS 4301 23RD AVENUE, N.
CITY-ST-ZIP ST. PETERSBURG FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DPVST ☒ Change ☐ Addition

1.2 NAME Hashem, Carolyn J.
1.3 STREET ADDRESS 4500 Overlook Dr. NE
1.4 CITY-ST-ZIP #210 ST. Petersburg, FL. 33703

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-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 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.

SIGNATURE: *[Signature]* Carolyn Hashem x 4/28/98 (P15) 822-8686

CFR2E034 (10/97)