## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9500008845 (6)

## JUNE CARDIN REALTY CORPORATION

80000 SOUTH ORANGE AVE SUITE 203B ORLANDO FL 32809		90000 SOUTH ORANGE ORLANDO FL 32909	ave., Suite	3 <b>B</b>						
					3. Date Incorporated or Qualified 3e. Date of Last Report 02/01/1995 01/22/1996			eport		
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Ap	plied For	
21		26						ot Applicable		
Suite, Apt 22		Suite, Apt. #, etc.	27			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	)	City & State	<del></del> 1			Election Campaign Financing     Trust Fund Contribution	g \$5.00 May Be Added to Fees			
Zip <b>24</b>	Country 25	Zip <b>29</b>	29 30			8. This corporation has liability for intengible tax under s. 199.032, Florida Statutes ✓ Yes ☐ No				
	9. Name and Address of Cur	rrent Registered Agent				10. Name and Address of New Re	gistered /	Agent		
CAR	DIN, JUNE E			81	Name					
80000 SOUTH ORANGE AVE., SUITE 203B ORLANDO FL 32809				82	Street A	reet Address (P.Ö. Box Number is Not Acceptable)				
J. 1				83	·					
				84	City		FL	<b>85</b> Zip	Code	
office or re	to the provisions of Sections 607, egistered agent, or both, in the St m familiar with, and accept the of	tate of Florida. Such change wa	s authorized	l by	the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of t the app	changing if ointment as	s registered registered	
	Storature, typed or practed raince of registered	i agent and title if applicable (N	OTE Registered	Age	nt signature re	quired when re-natating)	DATE			
12.	OFFICERS			13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12	
TITLE	D	DELETE	DELETE 11TIT					Change	Addition	
NAME	CARDIN, JUNE E		1.2 NA	ME						
STREET ADDRESS	80000 SOUTH ORANGE AV	E., SUITE 203B	SUITE 203B 1.3 \$1		ADDRESS					
CITY - ST - ZIP	ORLANDO FL 32809		1.4 CIT	Y-\$	T-ZIP					
THTLE	□ DE		2.1 TIT	LE				Change	☐ Addition	
NAMÉ			2.2 NAME							
STREET ADDRESS			2.3 ST	STREET ADORESS						
City - ST - ZIP			2. 4 CI	TY - 5	ST - 24P					
TITLE		☐ DELETE	3.1 TIT	LΕ				☐ Change	Addition	
NAME			3.2 NA	ME	j				j	
STREET ADDRESS			3.3 STI	REET	ADDRESS				1	
CITY-ST-ZIP			3.4. CI	TY-S	ST - Z(P					
TITLE		☐ DELETE	4.1 TIT	LΕ	ļ			Change	☐ Addition	
NAME:			4. 2 NA	ME						
STREET ADDRESS			4.3 ST	REET	ADDRESS					
CITY - ST - ZIP			4.4 CIT	Y - S	T- ZIP					
TITLE		☐ DELETE	5.1 TIT	LE				Change	Addition	
NAME			5.2 NA	ME						
STREET ADDRESS			5.3 ST	REET	ADDRESS					
CHTY-ST-ZIP			5.4 CH	Y-S	1-21P					
1/TLE			6 1 TIT	1 TITLE				Change	Addition	
NAME			6.2 NA	ME	]					
STREET ADDRESS			6.3 \$11	REET	ADDRESS					
CITY C1 710			64.017	nu e	~ 7un				1	

14. I do 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