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PROFIT CORPORATION. ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT # P95000010445 (1)

ASHURST REALTY, INC.

Principal Place of Business

Mailing Address

FILED Apr 22 1998 8:00am Secretary of State



5440 N STATE ROAD 7 SUITE 202 5440 N STATE ROAD 7 SUITE 202 FT LAUDERDALE FL 33319 FT LAUDERDALE FL 33319 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 02/01/1995 2. Principal Place of Business 4. FEI Number Applied For 65-0554078 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 CORAL Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Yes ∏ No Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 81 ASHURST, ERNEST D III 5440 N STATE ROAD 7 SUITE 202 82 FT LAUDERDALE FL 33319 83 84 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statules, 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 official statules. SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE TITLE 1.1 THLE ASHURST ERNEST ASHURST, ERNEST D III NAME 1.2 NAME 5440 N STATE ROAD 7 SUITE 202 8959 NW 3 1.3 STREET ADDRESS STREET ADORESS FT LAUDERDALE FL 33319 CORAL SPRI 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition TITLE 2.1 TITLE NAME 22 NAME STREET ADORESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY - \$1 - ZIP DELETE Change Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME **5.2 NAME** STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST-ZIP 7000024862**37**^{Alange} -04/13/38--01018--028 TITLE □ DELETE Addition 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS ***300.00 14. Thereby 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 f 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 13 if changed, or or are graceful or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or or are graceful or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or or are graceful or the receiver or trustee.