SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P95000022126 (3)

ALL CITY REALTY & INVESTMENTS, INC.

Principal Place of Business Mailing Address

FILED Aug 17 1998 8:00am Secretary of State



3848 W BROWARD BLVD PLANTATION FL 33312				575 NW 46TH TERR. PLANTATION FL 33317				DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/17/1995	
<u> </u>	Place of Busin	2a. Mailin	g Address				4. FEI Number Applied For		
21		26	26				65-0424774 Not Applicable		
Suite, Apt.	#, etc.	Suite,	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required		
City & State			City 8	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24		Country 25	Zip 29	29 30				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30Yes No	
								10. Name and Address of New Registered Agent	
BRO		8			Name	e			
	B W B ROWA NTATION FL					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									
						Registered Agent signature required when reinstating) 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P	OFFICERS AN	DURECTOR		1.1 โป				
NAME	BROWN K	KINGSLY A		DELETE	1.2 NA			L_I Change L_I Addition	
STREET ADDRESS		ROWARD BLVD					ADDRESS		
CITY-ST-ZIP		ON FL 33317			1.4 CIT			1	
TITLE	-			DELETE	2.1 TITI		<u></u>	Change Addition	
NAME					2.2 NA	ΛE		Change (Audition	
STREET ADDRESS					2.3 STR	EET	ADDRESS	3	
CITY-ST-ZIP	ST-ZIP			2.4			ZIP		
TITLE						.E		Change Addition	
NAME					3.2 NAM	Æ			
STREET ADDRESS					3.3 STREET ADD		address		
CITY-ST-ZIP			. <u> </u>		3.4 CIT	Y-ST-	ZIP		
TITLE				DELETE	4.1 TITL	E.		Change Addition	
NAME					4.2 NAN				
STREET ADDRESS						4.3 STREET ADDRESS			
CITY-ST-ZIP					4.4 CITY		ZłP		
TITLE				DELETE	5.1 TITL			Change Addition	
NAME STREET ADDRESS					5.2 NAA		DDDCCC		
STREET ADDRESS							ADDRESS		
CITY-ST-ZIP TITLE				Document	5.4 CITY 6.1 TITL		ZIP		
NAME				DELETE	6.2 NAN			9000026181 9 9 Addition	
STREET ADDRESS							ADDRESS	-08/17/9801137045 PE	
CITY-ST-ZIP					6.4 C(T)			90000261819 Addition -08/17/9801137045 PE ***550.00	

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. 7/21/48 (954) 791