## FILE NOW: FILING FEE AFTER MAY 11S \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000027162 (3)

	OM PRO REALTY, INC.	Mailing Address 1701 GROVE PARK DR ORANGE PARK FL 32073	4638		
				3. Date Incorporated or Qualified 04/03/1995	3a. Date of Last Report 05/01/1996
2. Principal Place of Business		2a. Marling Address		4. FEI Number	Applied For
Suite, Apt	# old	[26] Suite, Apt. #, etc.		59-3359696	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	<b>28</b>	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
24	25	29	30		Yes No
	g. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Ro	egistered Agent
	YCE MERRETT		81 Name		
1440-1 KINGSLEY AVE. ORANGE PARK FL 32073			82 Street Add	ddress (P.O. Box Number is Not Acceptable)	
On.	NITCE FAIR PL 02010		83		
			84 City		<b>■■ 85</b> Zip Code
					- <b>FL</b>
SIGNATURE	Signature, typicid or printed name of registered a	agent and little if applicable (NO	TE: Registered Agent signature requ	*	
12.	PST OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
NAME	JOYCE MERRETT	L. Duck it	1.2 NAME		CT cuttings CT Appution
STREET ADDRESS	1701 GROVE PARK DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	ORANGE PARK FL		1.4 CITY-\$1-7IP		
TITLE	***	☐ DELFTE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS CITY-ST-ZIP			2.3 STREFT ADDRESS 2.4 CHY-ST-7IP		
TITLE		DELETE	31 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STRFF 1 ADDRESS		
CITY-ST-ZIP		DELFTE	3 4. CITY- \$1 - 7IP		☐ Change ☐ Addilion
TITLE NAME		[] DETELE	4.1 TITLE 4.2 NAME		Change Adullion
STREET ADDRESS			4.2 STREET ADDRESS		
CITY-ST-ZIP	}		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TiTLE		Change Addition
NAME			5.2 NAME		14/1/2/
STREET ADDRESS			5.3 STREET ADDRESS		HILLIX ORS
CITY-ST-ZIP		DELETE	54 CITY-S1-7IP		Change Addition
TITLE NAME	1	□ btrrtt	6.1 HILE 6.2 NAME	50000221	.9575
STREET ADDRESS			6.3 STREET ADDRESS	50000221 -06/23/97010	75006

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 is true and accurate and that my signature shall have the same legal effect as if made under eath, 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:

Joyc F Man 10

Jours E. Merrett May 31/9

CR2E034 (9/96)

**FILED** 

Jun 20 1997 8:00am

Secretary of State