FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00



COF ANNU	PROFIT RPORATION JAL REPORT 1996	Sandra (Secreta	RIMENT OF STATE B. Mortham ary of State CORPORATIONS		
DOCUI	MENT # P9500	00027408 (0))		
1	OS REALTY, INC.				188 11811 18811 81811 88181 1881 1881
Principal Place	of Business	Mailing Address		(1001/03) (1) 15/6/ DIVI ODIN ODIN ODIN ODIN ODIN	110 (1014 1001 0101 9010) 1014 1701
4877 NW 67TH AVENUE 4877 NW 67TH LAUDERHILL FL 33319 LAUDERHILL FL			Ē		
				3. Date Incorporated or Qualified 3a. [04/06/1995	Date of Last Report
F '	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		65-0569821	Not Applicable
22		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zφ	Country	7 _{Ip}	Country	Trust Fund Contribution L.J. 8. This corporation has liability for intangible	Added to Fees
24	25	29	30	Florida Statutes 🔲 Yes 📈 No)
	9. Name and Address of Currer	nt Registered Agent	81 Name	10. Name and Address of New Register	ed Agent
THURST	ron, Kenneth			(D.C. Doubles Louis Net Association)	
4877 N\	W 67TH AVENUE		Street Add	dress (P.O. Box Number is Not Acceptable)	
LAUDERHILL FL 33319			83		
			84 City		■ 85 Zrp Code
11. Pursuant t	o the provisions of Sections 607,0502	2 and 607.1508, Florida Statutes	. the above named corpo	oration submits this statement for the purpose of	choosing the social and affine
or registeri familiar wit	ed agent, or both, in the State of Florid h, and accept the obligations of, Sect	da. Such change was authorized ion 607.0505, Florida Statutes.	by the corporation's boa	rard of directors. Thereby accept the appointment	. as registered agent. I am
SIGNATURE _	Signature typed or printed name of registered agent	of an experience of the second	er er e		
12.	OFFICERS ANI		Registere if Agust signature received 13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	D	DELETE	1. 1 TITLE	A DESTRUCTION OF FRANCE TO CHARLES	Change Addition
NAME CAMECA NODOSOS	THURSTON, KENNETH		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	4877 NW 67TH AVENUE LAUDERHILL FL 33319		1.3 STHEET ADDRESS		
THE	DODLINKE I E OO IO	DELETE	1.4 CITY - \$1 - 7 iP 2. 1 TITLE		Change Addition
NAME		-	2.2 NAME		
STREET ADDRESS	ı		2 3 STREET ADDRESS		
CITY-S1-ZIP		DELETE	2 4 CHY-ST-7(P		
NAME		∐ bttit	3 1 TO LE 3 2 NAME		Change Addition
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIF			3.4 CIEY - \$1 - ZIP		
THILE		DELETE	4 º TITLE		Change Addition
NAME STREET ADDRESS			4.2 NAME 4.3 STREET ADDRESS	•	
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		☐ DELETE.	5 1 TITLE		Change Addition
NAME OURSEL ARROYSON			5 2 NAME		
STREET ADDRESS C/TY-ST-Z/P			5.3 STREET ADDRESS		
TillE		DELETE	54 CITY-ST-ZIP 6 1 TITLE		Change Addition
NAME		_	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Fiorida 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 cath; that I am an officer or director of the comporation 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-28-96 954-7429617