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PROFIT
CORPORATION *
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000036908 (8)

FIDELITY REAL ESTATE OF FLORIDA, INC.

FILED	
May 06 1997 8:00am	1
Secretary of State	

Principal Place of Business Mailing Address 172-107TH AVE 8350 GENTRAL AVE. 816. 160 TREASURE ISLAND FL 33706 US TREASURE ISLAND FL 33706 US			18:-180 > 19706-4718	3. Date Incorporated or Qualified 05/10/1995	3a. Date of Last Report 04/09/1996
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 /73-10	ace of Business	26 172·107#	dere	65-0587568	Not Applicable
Suite, Apt #	F, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
3 TReasi	ure ISLAND FL	28 TREasure	IS F MAD Country	Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country	8. This corporation has liability for in	
4 33706	25 PIN	29 33704	30 PIN		Yes No
	9. Name and Address of Co	urrent Registered Agent		10. Name and Address of New Reg	latered Agent
	SURE ISLAND FL 33706 o the provisions of Sections 607	7.0502 and 607.1508, Florida Stat	83 City	dress (P.O. Box Number is Not Acceptable of the outportation submits this statement for the outportation submits the outportation submits this statement for the outportation submits the outportation submits this statement for the outportation submits sub	FL 85 Zip Code
SIGNATURE	Signature, typed or printed name of register		s authorized by the corpora Florida Statutes. OTE: Registered Agent signature requ	rporation submits this statement for the puation's board of directors. I hereby accept uired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE
	<u>-11</u>	a AND DIRECTORS	101		
THE	ט	T DELETE	1.1 T(T) F	ADDITIONO/OFFAIGLE TO OFF TO	
	D CARTER, HARRY JR	☐ DELETE	1.1 TITLE 1.2 NAME	ABOTTOTO OT TO	
MAM	CARTER, HARRY JR 172-107TH AVE	☐ DELETE	1.2 NAME	Abdition of Auto-	
NAME STREET AUDRESS	CARTER, HARRY JR	☐ DELĒTE	1.2 NAME 1.3 STREET ADDRESS	Abdition of Auto-	
NAME STREET AUDRESS CITY-ST-7IP	CARTER, HARRY JR 172-107TH AVE	☐ DELETE	1.2 NAME		☐ Change ☐ Addition
NAME STREET ALDRESS CITY-ST-7/P TITLE	CARTER, HARRY JR 172-107TH AVE		1.2 NAME 1.3 Street address 1.4 City-St-Zip		☐ Change ☐ Addition
NAME STREY LAUDREGS COTY-SE-ZIP TITLE	CARTER, HARRY JR 172-107TH AVE		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE		☐ Change ☐ Addition
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4. 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 andicated 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 are no 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: SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-97

813 3681900