PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



DOCUMENT # P9500038841

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

May 08, 1999 8:00 am Secretary of State

05-08-1999 90028 024 ***150.00

UNIFIED	REALTY, INC.			E IMBINAAN ISA 1888 BEHIL ANIH AR	KIT Ca nta Batta Din o l (Bit a 1811)	4 81801 (1 6 1 106)
Principal Place	of Business	Mailing Address			'II AAII4 BAIAS ILIAI ERISI INII	
2307 SW 37 AV	Æ.	2307 SW 37 AVE.				
SUITE 301		SUITE 301		DO NOT WELL	TE IN THIS SPACE	
MIAMI FL 33145 MIAMI FL 33145					TE IN THIS SPACE	
				3. Date Incorporated or Qualifed		
	(0)	A Mallian Address		05/15/1995 4. FEI Number		pplied For
- 1000	ace of Business OCOPAL WAY	2a. Mailing Address		·		ot Applicable
21 044C		Suite, Apt. #, etc.		65-0581484		Additional
Suite, Apt.	3	27		5. Certificate of Status Desired	Fee Ro	equired
City & State	Ti FC	City & State		6. Election Campaign Financing		May Be
23 LVI+	<u> </u>	28		Trust Fund Contribution		to Fees
Zip つるが	Country	Zip	Country	8. This corporation owes the curre	ent year Intangible ☐ Yes	□No
24 091	75 25	29 3	0	Personal Property Tax. 10. Name and Address of New R		
	9. Name and Address of Curren	t Registered Agent	81 Name	To 1: /	egistered Agent	
JALIL, GEORGE C				drivers /P. O Box Nurraber is Not Acceptable)		
2307 SW 37 AVE.				190 Wal Way	su ou	<u>ප</u>
SUITE 301				han'		ļ
MIAMI FL 33145			84 City	Tata	85 - Zi o	Code 7
			- <i>' f</i>	-	FL 7/3	114
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.						
	m ramiliar with, and acteb the obligat	ilons of Section 607.0505, Florid	a Statutes.		418297	"
SIGNATURE	Signature, typed or printed ame of registered agen	t and title if applicable. (NOTE R	egistered Agent signature req	uired when reinstating)	DATE	
12.	OFFICERS AN	D DIRECTORS	13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change	Addition
NAME	JALIL, GEORGE C		1.2 NAME	2490 Chral Way	, ste 20.	3
STREET ADORESS	2307 SW 37 AVE.		1.3 STREET ADDRESS	# 1 A W 2	2214	
CITY-ST-ZIP	MIAMI FL 33145		1.4 CiTY-ST-ZiP	MIAPIT PC		
TITLE		☐ DELETE	2.1 TITLE		☐ Change	☐ Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			}
CITY-ST-ZIP			2. 4 CITY-ST-ZIP			
TRILE		☐ DELETE	3.1 TITLE		Change	Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP			3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			ł
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP		FTIAL	
TITLE		☐ DELETE	5.1 TITLE		Change	☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			ļ
CiTY-ST-ZiP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME	_		6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

CITY-ST-ZIP 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TWEED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR