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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

<u> </u>			OF CORPORATIONS			
DOCU 1. Corporati	MENT # P9500	00040110 (5)			
	MEL REAL ESTATE GROUP	•				
		,		P JERRIA DA GAR JOHEN RANG DANG DANG	HARIO DOMA DI DILI DANDI ILI	. .
Principal Plac	ce of Business	Mailing Address				
5401 CENTRAL AVE						
ST PETERS	BURG FL 33710	ST PETERSBURG FL	33710			
ļ				3. Date Incorporated or Qualified	3a. Date of Last	Remort
2. Principal F	Place of Business	0.11.5		05/19/1995	July Sales of East	Порот
21	Control of Calculations	2a. Mailing Address		4. FEI Number		Applied For
Suite, Apt	#, etc.	Suite, Apt. #, etc.		59-3319566	\$0.7	Not Applicable 5 Additional
22 City & Sta	to	27		5. Certificate of Status Desired		 Additional Required
23		City & State		6. Election Campaign Financing	\$5.0	00 May Be
Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for	ADO	ed to Fees
24	25 9, Name and Address of Curro	29	30	Florida Statutes	□No	5 199.032,
	o, name and Addition of Curry	ent negistered Agent	81 Name	10. Name and Address of New R	egistered Agent	
ZACUR,	RICHARD A					
5200 CENTRAL AVENUE			82 Street Addr	ress (P.O. Box Number is Not Acceptab	le)	
SIPER	ERSBURG FL 33733		83			
*			84 City		—. 85 Z	p Code
11. Pursuant	to the provisions of Sections 607.050	02 and 607,1508, Florida Statu	ites, the above-named cornor	ation submits this statement for the a	FL * 3 2	
• familiar wi	red agent, or both, in the State of Flo ith, and accept the obligations of, Sec	rida. Such change was authori ction 607.0505, Florida Statute	ized by the corporation's boar is.	ation submits this statement for the pur d of directors. I hereby accept the appo	pose of changing its pintment as registere	registered office d agent. I am
SIGNATURE	Richard A. Zacur Signature, typed or printed name of registered agen			L.	/1/96	
12.	OFFICERS AN	nt and title it applicance ND DIRECTORS	OTE: Registered Agent signature required 13.	d when reinstating)	DATE	
TITLE	D	X DELE1€	1. 1 TITLE	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTO Change	DRS IN 12 Addition
NAME STREET ADDRESS	RUMMEL, HAROLD E 5401 CENTRAL AVE		1.2 NAME	RUMMEL, HAROLD E	Cry Change	Madition .
STREET ADDRESS CITY-ST-ZIP	ST PETERSBURG FL 33710		13 STREET ADDRESS	5401 CENTRAL AVENUE		
TITLE	D	K) DELETE	1.4 CITY-ST-ZIP 2 1 TITLE	ST PETERSBURG, FL	33710	
NAMÉ	PRICE, WILLIAM J	EE) Print	2.2 NAME	STD NICHOLS, KATIE	X Change	Addition
STREET ADDRESS	5401 CENTRAL AVE		2.3 STREET ADDRESS	1682 OCENAVIEW DR.		
CITY-ST-ZIP TITLE	ST PETERSBURG FL 33710		2 4 CrTY - ST - ZrP	TIERRA VERDE, FL		
NAME		DELETE	3. 1 TITLE		Change	Addition
STREET ADDRESS			3.2 NAME 3.3. STREET ADDRESS			j
CITY-ST-ZIP			3.4 C/TY - ST - Z/P			
TITLE NAME		□ DELETE	4. 1 TITLE		☐ Change	Addition
STREET ADDRESS			4.2 NAME			
CITY-ST-ZIP			4.3 STREET ADDRESS			
TITLE		DELETE	4.4 CITY - ST - ZIP 5. 1 TITLE		[Change	FT Addis-
NAME CYPECT ADDRESSO		,v	5.2 NAME		Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP		•	5.3 STREET ADDRESS			
TITLE		DELETE	5.4 CITY - ST - ZIF	90000183 -05/24/960103	8389	
NAME		[] DELICIE	6.1 TITLE : 62 NAME	***200.00	•⊃ U⊡rChange	Addition
STREET ADDRESS			M. C. LEWICE			ايم
OTHECT ADDINESS			6 3 STREET ADDRESS			2/, 1

Too 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), 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 appears in Block 12 or Block 13 if changed or on an attachment with an address.

IGNATURE AND TYPED OR PRINTED NAME OF STONING OFFICER OR DIRECTOR

SIGNATURE: <

4/11/96 (813) 327-5111