FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

___ 1<u>9</u>98

Suite, Apt. #, etc.

City & State

DOCUMENT # P95000050510 (3)

CENTRECORP REALTY SERVICES, INC.

Principal Place of Business

2401 PGA BLVD
SUITE 280
PALM BEACH GARDENS FL 33410

2. Principal Place of Business

Address

Mailing Address

2401 PGA BLVD
SUITE 280
PALM BEACH GARDENS FL 33410

2a. Mailing Address

Suite, Apt. #, etc.

City & State

FILED May 28 1998 8:00am Secretary of State



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

Applied For

\$8.75 Additional

Fee Regulred

\$5.00 May Be

Not Applicable

06/28/1995

65-0759197

5. Certificate of Status Desired

6. Election Campaign Financing

4. FEI Number

23	28					Trust Fund Contribution		Added	to Fees
Zip	Country	Zip	Coun			8. This corporation owes or has	paid the cur	rent year Ir	ntangible
24	25 29		30			Personal Property Tax due Ju			No
	g. Name and Address of Current Regis	1		10. Name and Address of New I	Registered /	tgent			
BARKDULL, JAYNE REGESTER					Name				
LEVY, KNEEN, MARIANA, CURTIN, ET AL				2	Street Addres	s (P.O. Box Number is Not Accept	table)		
1400 CENTREPARK BLVD SUITE 1000									
Į WE	ST PALM BEACH FL 33401		83	3					[
			84	4	City			85 Zip	Code
				\perp	·		FL	<u> </u>	
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 Horida. 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.									
agent la	m familiar with, and accept the obligations o	f, Section 607.0505, Flo	orida Statute	es.	no corporador	to board of antionors, thoroby doc	opt the app	Sing norm ac	, regional
SIGNATURE									
The state of the s					signature required		DATE DO AND	DIOCOTO	BO 11.10
12, TITLE	OFFICERS AND DIRECTORS DELETE		1.1 TOLE	13.		ADDITIONS/CHANGES TO OF	TCERS AND	Change	Addition
NAME	ODEOTON JOHN WA		1.2 NAME					Gritarige	
STREET ADDRESS	2401 PGA BLVD SUITE 280				approc				
1·· 1	PALM BEACH GARDENS FL 33410	1.3 STREE		ĭ				1	
CITY-ST-ZIP	DS DELETE GREEN, ROBERT S		1.4 CHY- 2.1 THE		ZIP			Change	Addition
NAME			2 2 NAME			Change			
STREET ADDRESS	2851 JOHN STREET, SUITE ONE		2.3 STREE		JUBECC				
CITY-ST-ZIP	MARKHAM, ONTARIO, CANADA LISP	R-5R7	2. 4 CiTY		1				Ì
TITLE			3.1 TITLE		2.".			Change	Addition
NAME			3.2 NAME	Ε					
STREET ADDRESS			3.3 STREE	ET AD	DDRESS				1
CITY-ST-ZIP			3.4. CITY	-ST-	- Z(P				
TITLE		DELETE	4.1 TITLE					Change	Addition
NAME			4.2 NAM	Æ					Ì
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CITY-ST-ZIP			4.4 C(1Y-	-S1-	ZIP				
TITLE		DEL e te	5.1 TITLE					☐ Change	☐ Addition
NAME			5.2 NAME	•					
STREET ADDRESS			5.3 STREE	ET AD	DDRESS				
CITY-ST-ZIP			5.4 CITY-	S1-	7IP				
TITLE		☐ DEL e te	6.1 TITLE					Change	☐ Addition
NAME			6.2 NAME	F					1
STREET ADDRESS			6.3 STREE	ET AC	DDRESS				ĺ
CITY-ST-ZIP	/_\		6.4 CITY	ST-	ZIP				
14. Thereby 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 of inual report is supplied entire 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 of the eceiver 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, di ordan attachment with an address.									