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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000062097 (7)

CERTIFIED REALTY MANAGEMENT, INC.

Principal Place of Business

Mailing Address

FILED Apr 24 1997 8:00am Secretary of State



FT LAUDERDALE FL 93334			FT LAUDERDALE FL 33334							
							3. Date Incorporated or Qualified 3a. Date of Last Report 08/10/1995 07/08/1996			eport
2. Principal Place of Business			2a. Mailing Address				4. FEI Number			plied For
21			26				65-0609995 Not Applicable			
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired Serviced Fee Required			
City & State	City & State			City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip 24	Count	y	7(p		Country 30	1	This corporation has liability for in Florida Statutes	ntangible tax Yes \[\] N		199.032,
	9. Name and Addre	ss of Current Re	gistered Age	nt			10. Name and Address of New Reg	istered Age	nt	
DRIGERT, THOMAS E 110 NE 51 ST FT LAUDERDALE FL 33334					81	Name Street Ad	dress (P.O. Box Number is Not Acceptab	le)		
FIL	AUDERDALE PL 333	34			83					
					84	City		FL ⁸	5 Zip (Code
11. Pursuant office or ragent. I a	to the provisions of Sec registered agent, or bot im familiar with, and acc	tions 607.0502 an h, in the State of Fi copt the obligation	d 607.1508, F lorida. Such o s of, Section	lorida Statute change was a 607.0505, Flo	s, the above uthorized by ride Statute	e-named co the corpor	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of cha I the appoint	anging its ment as	s registered registered
	THO 14 Signature, typed or printed name	4				Sur	quired when reinstaing)	T/ K	97	
12.	,	FFICERS AND DI			13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	D		L	DELETE	1.1 1πι.Ε			L	Change	Addition .
NAME	DRIGERT, THOMAS	S E			1.2 NAME					
STREET ADDRESS	110 NE 51 ST				1.3 \$1REE1					
CITY-ST-ZIP	<u>FT LAUDERDALE</u> F	L 33334		DELETE	1.4 DITY - \$ 2.1 THE	1-7IP			Change	Addition
TITLE NAME			L	1 DECEME	1				Спапре	
STREET ADDRESS					2.2 NAME 2.3 STREET	ADDOCCO	•			
CITY-ST-ZIP					2.3 STREET	i				
TITLE				DELETE	3.1 TITLE	oi - Eir			Change	Addition
NAME			-		3.2 NAME					
STREET ADDRESS					3.3 STREET	ADDRESS				
CITY-ST-ZIP					3.4. CITY-1	ì				
TITLE				DELETE	4.1 THTLE				Change	Addition
NAME					4. 2 NAME					}
STREET ADDRESS					4.3 STHEET	ADDRESS				
CITY-ST-ZIP					4.4 CITY- S	T-ZIP				\ \ \ \ \ \
TITLE				DELETE	5.1 TITLE				Change	Addition
NAME					5.2 NAME					
STREET ADDRESS					5 3 STREE1	ADDRESS				
CITY-ST-ZIP					5.4 City - S	1-7IP				ĺ
TITLE			Γ	DELETÉ	6 1 TITLE				Change	☐ Addition
NAME					6.2 NAME	1				}
STREET ADDRESS					6.3 STREET	ADDRESS				
CITY-ST-ZIP					6.4 CITY - S	ĺ				
	by certify that the inforn	ation supplied with	h this filing do	os not qualif			ed in Section 119.07(3)(i), Florida Statutes	. I further cer	tify that I	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.