## B-16-98 B 3312 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500063139 (6)

BONNEVILLE GROUP REALTY DEVELOPMENT, INC.

Principal Place of Business Mailing Address 4801 S. UNIVERSITY DR. 4801 S. UNIVERSITY DR. SUITE 207 SUITE 207 DO NOT WRITE IN THIS SPACE FT. LAUDERDALE FL 33328 FT. LAUDERDALE FL 33328 3. Date Incorporated or Qualified 08/15/1995 2. Principal Place of Business 2s. Mailing Address FEI Number Applied For 65-0606359 21 Not Applicable Suite, Apl. #, etc. Suite, Apt. #, otc \$8.75 Additional 5. Certificate of Status Desired 27 SUITE BOOE SUITE Fee Required City & State City & State 6. Etaction Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Zio Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 😿 25 29 30 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEGUIDO, SAL 3900 GALT OCEAN DR #2701 82 Street Address (P.O. Box Number is Not Acceptable) FT LAUDERDALE FL 33308 83 City Zip Code 85 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, familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent signature required when reinstating ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 11 TITLE DE GUIDO, SAL NAME 1.2 NAME 3900 GALT OCEAN DR APT 2701 STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33308 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 21TITLE Change Addition TITLE COOK, DONNA NAME 22 NAME 414 LAKESIDE CIR STREET ADDRESS 2.3 STREET ADDRESS **SUNRISE FL 33326** CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY - ST - 21P DELETE Change Addition 41 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TO F 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 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 supplied entity will all 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 received or frustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, and attachment with an address.

61 TITLE 6.2 NAME

6.3 STREET ADDRESS

6 4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

SAL DEGUIOU

DELETE

Change

Addition

FILED

Mar 16 1998 8:00am

Secretary of State