

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000070763 (4)

1. Corporation Name

DELPHI REALTY SERVICES, INC.



Principal Place of Business

Mailing Address

1873 DOLPHIN BLVD. SOUTH
ST. PETERSBURG FL 33707

1873 DOLPHIN BLVD. SOUTH
ST. PETERSBURG FL 33707

3. Date Incorporated or Qualified

09/11/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 3333 N.E. 27th TERRACE

26 3333 N.E. 27th TERRACE

4. FEI Number

59-3336465

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23 HightHouse Point FL

28 HightHouse Point FL

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33064

25 BROWARD

29 33064

30 BROWARD

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PILOS, HARRY II
1873 DOLPHIN BLVD. SOUTH
ST. PETERSBURG FL 33707

81 Name

HARRY PILOS II

82 Street Address (P.O. Box Number is Not Acceptable)

3333 N.E. 27th TERRACE

83

84 City

HightHouse Point FL

85 Zip Code

33064

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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.

SIGNATURE

Signature type 1 or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

6/20/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

11 TITLE

☒ Change ☐ Addition

NAME PILOS, HARRY II
STREET ADDRESS 1873 DOLPHIN BLVD. SOUTH
CITY-ST-ZIP ST. PETERSBURG FL 33707

12 NAME

13 STREET ADDRESS

3333 N.E. 27th TERRACE
HightHouse Point, FL. 33064

14 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE ☐ DELETE

21 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

TITLE ☐ DELETE

31 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

TITLE ☐ DELETE

41 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

TITLE ☐ DELETE

51 TITLE

☐ Change ☐ Addition

NAME

STREET ADDRESS

CITY-ST-ZIP

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

700001902577
-07/23/96--01141--020

***225.00

☐ Change ☐ Addition

TITLE ☐ DELETE

61 TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

TITLE ☐ DELETE

14. I do 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 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Signature Date

6/20/96

CR2E034 (3/96)