

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Feb 24, 1999 8:00 am  
Secretary of State

02-24-1999 90053 011 \*\*\*150.00

DOCUMENT # P95000074793

1. Corporation Name  
DEE CAR REALTY, INC.

Principal Place of Business

701 S.E. 6TH AVENUE  
#201  
DELRAY BEACH FL 33483

Mailing Address

701 S.E. 6TH AVENUE  
#201  
DELRAY BEACH FL 33483

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/28/1995

4. FEI Number  
65-0665831

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing ☐ \$5.00 May Be  
Trust Fund Contribution Added to Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 65 NE 4TH AVENUE  
Suite, Apt. #, etc.

2a. Mailing Address

26 65 NE 4TH AVENUE  
Suite, Apt. #, etc.

23 Delray Beach FL  
City & State

24 33483 25 US  
Zip Country

28 Delray Beach FL  
City & State

29 33483 30 US  
Zip Country

9. Name and Address of Current Registered Agent

CARBONE, LOUIS J ESQ  
701 S.E. 6TH AVENUE  
SUITE 201  
DELRAY BEACH FL 33483

10. Name and Address of New Registered Agent

81 Name LOUIS J. CARBONE, P.A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
65 NE 4TH AVENUE  
83  
84 City Delray Beach FL 85 Zip Code 33483

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. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/10/99

12. OFFICERS AND DIRECTORS

TITLE PSD  
NAME CARBONE, PAT  
STREET ADDRESS 15452 STRATHEARN DR  
CITY-ST-ZIP DELRAY BEACH FL 33446

TITLE VPD  
NAME CARBONE, DELORES  
STREET ADDRESS 15452 STRATHEARN DRIVE  
CITY-ST-ZIP DELRAY BEACH FL 33446

TITLE S  
NAME CARBONE, LOUIS  
STREET ADDRESS 1708 S. OCEAN DRIVE  
CITY-ST-ZIP DELRAY BEACH FL 33403

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not require the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/99

561 272-0282

Date

Daytime Phone #

CR2E034 (11/98)