Mailing Address

101 WESTLAKE DR.

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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**BOYNTON BCH FL 33436** 

PROFIT CORPORATION ANNUAL REPORT

1999

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cipal Place of Business

STEINBERG, ANDREW

101 WESTLAKE DR. BOYNTON BCH FL 33436

WESTLAKE DR.

NTON BCH FL 33436

ite Apt. #, etc.



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State
DIVISION OF CORPORATIONS

## OCUMENT # P95000077825

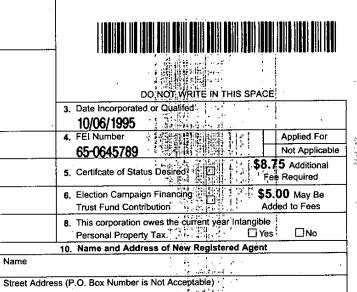
Country

9. Name and Address of Current Registered Agent

HUNTER ISLES REALTY CORP.

FILED Feb 10, 1999 8:00am Secretary of State

02-10-1999 90029 027 \*\*\*150.00



Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement to the purpose of changing its registered for the purpose of change was authorized by the corporation's board of directors. I hereby accept the appointment as registered that the purpose of the purpose o

Country

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	onice or registered agent, or both, in the State of Plottad. Such Charge was authorized by the corporations about the State of Plottad. Such Charge was authorized by the corporations about the State of Plottad.			
	TURE:  Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
	lian- i	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
		P DELETE	1.1 TITLE	Addition □ Change □ Addition
		STEINBERG, ANDREW	1.2 NAME	
<b>.</b>	ORESS	101 WESTLAKE DR.	1.3 STREET ADDRESS	
81.Z	131 - 1	BOYNTON BCH FL	1.4 CITY-ST-ZIP	
	<del>"</del>	□ DELETE	2.1 TITLE	☐ Charlge ☐ Addition
	1		2.2 NAME	
1	JUDE GG		2.3 STREET ADORESS	****
	DIRESS		2.4 CITY-ST-ZIP	
2	.ir.	☐ DELETE	3.1 TITLE	Change Addition
			3.2 NAME	1 maj (n. 12). 24 maj (n. 12)
	200500		3.3 STREET ADDRESS	many to a second of the control of t
	DORESS		3.4. CITY-ST-ZIP	・ 1 では、1 では、1 では、1 はない。 1 では、1 できゅうかん 新り成れ ことができます。 1 という 1 は 1 は 1 は 1 は 1 は 1 は 1 は 1 は 1 は 1
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k 2	P	DELETE	5.1 TITLE	☐ Change ☐ Addition
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2	<b>T</b> ir	i ⊓ DELETE	6.1 TITLE	☐ Change ☐ Addition
	111	,	6.2 NAME	
			6.3 STREET ADDRESS	
EET AL	DORESS		6.4 CITY, ST. 7IP	

Il 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 findicated 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 infificer 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 apprecia, with all other like empowered.

GNATURE

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/18/99 Day

0(3649664 Daytime Phone # (2E034<sup>2</sup>(11/98)

Zip Code