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

CORPORATION ANNUAL REPORT

1998



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #1. Corporation Name P95000079126 (5)

PROPERTY, ESTATE & MANAGEMENT, INC.

FILED Apr 30 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							BEILL BEILL 186		
1401 ATLANTIC BLVD. 1401 ATLANTIC RI				D.					
NEPTUNE BI	EACH FL 32286	NEPTUNE B		266					
						DO NOT WRIT		SPACE	***
9.0						 Date Incorporated or Qualified 10/11/1995 			
	lace of Business	2a. Mailing Ad				4. FEI Number			Applied For
Suite, Apt. #, etc		Suite, Apt. #, otc.			59-3346385			Not Applicab	
30110, Apr.	#, BtC	Soite, Apt	. #, Otc.			5. Certificate of Status Desired			Additional Required
City & Stat	е	City & Stal	te			& Floring Commiss Francis	····		
23		28				6. Election Campaign Financing Trust Fund Contribution	П		D May Be of to Fees
Zip	Country	Zip		Country	,	8. This corporation owes or has p	aid the cur		
24	25	29		30		Personal Property Tax due Jun			□ No
	9. Name and Address of Curre	int Registered Agen	nt			10. Name and Address of New R	egistered a	\gent	
	ATTERSON, LAWRENCE R			81	Name				
	10 SOUTH THIRD ST.			82	Street Ad	dress (P.O. Box Number is Not Accepta	able)		-
JA	CKSONVILLE BEACH FL 32250)		L					
				83					
				84	City			85 Zip	Code
					,		FL		
11. Pursuant office or r	to the provisions of Sections 607,056 enistered arrent, or both, in the State	02 and 607.1508, Flo	orida Statute	es, the above	e-named co	rporation submits this statement for the ation's board of directors. I hereby acceptions	purpose of	changing	its registere
agent La	m familiar with, and accept the oblig	gations of, Section 60	07.0505, Fic	orida Statutes	s.	ations board or directors, thereby acce	app on the	экпипенца	s registered
SIGNATURE									
	Signature, typed or printed name of registered au	sent and title if nonlicable	44.64.77						
			(NOTE		nt signature req	uired when reinstating)	DATE		
12.		ND DIRECTORS		13.	nt signature req	uired when reinstating) ADDITIONS/CHANGES TO OFF			
12. TIBLE	D	ND DIRECTORS	DELFTE	13. 1.1 TITLE	nt aignature req			DIRECTO Change	
12. TIBLE NAME	D Lallu, prakash	ND DIRECTORS		13. 1.1 TITLE 1.2 NAME					
12. TITLE NAME STREET ADDRESS	D Lallu, prakash 1401 atlantic blvd.	NO DIRECTORS		13. 1.1 TITLE 1.2 NAME 1.3 STREET	ADORESS				
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Lallu, prakash	OD DIRECTORS	DELFTE	13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S	ADORESS			Change	☐ Addition
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