PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # **P95000080044**

PALM BEACH COUNTY REALTY CORP.

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90074 008 ***150.00



Principal Place	e of Business			1	tinne liå iline Artic Adies a	#111 #B111 ##161 161	11 #### # ##*1 ##				
2000 NO. DIXIE HIGHWAY STE 6 2000 NO. DIXIE HIGHWAY S LAKE WORTH FL 33460 LAKE WORTH FL 33460							DO NOT WR	ITE IN THIS S	PACE		
						3. Date Inco	orporated or Qualifed				1
						10/16/	1995				ļ
2. Principal Place of Business			2a. Mailing Addre	ss		4. FEI Num			App	lied For	1
21			26			65-061	6120		Not	Applicable]
Suite, Apt. #, etc.			Suite, Apt. #, etc.						\$8.75 Ac	dditional	}
22			27			5. Certificate	e of Status Desired		Fee Req	µired—] -
City & State			City & State			6. Election	Campaign Financing		\$5.00 N	Лау Ве	
23			28			Trust Fur	nd Contribution		Added to	Fees	
Zip	Co	ountry	Zip	Cou	untry	8. This corp	poration owes the cur	rent year Intar		_	
24	25		29		Personal Property Tax. Yes No					1	
	9. Name and A	ddress of Current	Registered Agent			10. Name ar	nd Address of New	Registered A	gent		-
					81 Name	Ronu	Saint-El	(n 1			
	xander, Herzu				82 Street_Add		lumber is No Accept	table)			1
2000 NO. DIXIE HIGHWAY STE 6					20	<u>00 N 00</u>	1X16 HWY	1 76			4
LAKI	e worth fl 334	160			83 .	- •	- 1	•			1
					84 City ,	12 11			85 Zip C4	ode	1
					6	the wo) kilh	<u>FL_</u>	334	-6 0	╛
11. Pursuant	to the provisions of	Sections 607.0502	and 607.1508, Florid	a Statutes, the a	bove-named con	poration submits	this statement for the	purpose of ch	nanging its r	egistered	
office or n	egistered agent, or m familiar with, and	both, in the State of accept the obligation	Florida. Such chang ons of, Saction 607.0	je was authorize 505, Florida Stat	a by the corporat lutes.	on's board of dis	ectors. Friereby acce	pt the appoint		1310100	
SIGNATURE	COM	1 Small	T- EVen					á	! 1///a	Q	}
SIGNATURE	Signature, typed or printer	name of registered agent a	and title if applicable.	(NOTE: Registered	d Agent signature requir			DATE	1.1	T	16
12.		OFFICERS AND		13.			NS/CHANGES TO OF		the color		∤ է
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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 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: