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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 22 1998 8:00am

Secretary of State

1_{4/4} (813) 823-5000

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Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

P95000091993 (2)

AMERICAN REALTY NETWORK, INC.

Principal Place of Business Mailing Address						* 19011981 110 (510) 01111 02111 02111					
100 SECOND AVENUE SOUTH STE 1201 100 SECOND AVENUE SOUT					120	01					
ST. PETERSB	URG FL 33701	ST. PETERSBURG FL 33701					DO NOT WRITE IN THIS SPACE				
							3. Date Incorporated or Qualified				
							12/04/1995				
2. Principal P	lace of Business	2a, Mailing A	Address				4. FEI Number		A	oplied For	
21		26					NOT APPLICABLE		No.	ot Applicable	
Suite, Apt.	#, etc.	Suite, Ap	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional	
22		27					5. Certificate of Status Desired		Fee Re	beriupe	
City & State	9	City & St	City & State				6. Election Campaign Financing	_	\$5.00	May Be	
23		28	·				Trust Fund Contribution		Added	to Fees	
Zip	Country Zip			Country			8. This corporation owes or has paid the current year Intangible				
24	25 29 30			30			Personal Property Tax due June 30. Yes No				
g. Name and Address of Current Registered Agent						Name	10. Name and Address of New Registered Agent				
LECOMPTE, MORRIS A					81	Name				J	
100 SECOND AVENUE SOUTH STE 1201 St. Petersburg FL 33701				Ī	82	Street Addre	iss (P.O. Box Number is Not Acceptal	ole)			
					B3		· · · · · · · · · · · · · · · · · · ·				
					53						
				Ī	84	City		FI	85 Zip	Code	
dd Disassant	the continue of Continue COZ O	500 1 602 4500 1	The Sale Canal and					<u> </u>			
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 607.0505, Florida Statutes.											
SIGNATURE											
	Signature, typed or printed name of registered		(NOTE		Ager	nt signature require		DATE			
12.		ND DIRECTORS	DELETE	13.	_		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
TITLE	D LECOMOTE MODDIO 4	L	_ DECEME	1.1 1111				L	i Change	L Audilion	
NAME LECOMPTE, MORRIS A STREET ADDRESS 100 SECOND AVENUE SOUTH STE 1201				1.2 NAME 1.3 STREET ADDRESS							
STREET ADDRESS											
CITY-ST-ZIP TITLE	ST. PETERSBURG FL 3370		DELETE	1.4 C(T) 2.1 T(T)		1 - ZIP			Change	Addition	
NAME		_		2.1 INL				L.	_i blidings		
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP				2.4 CIT		1					
TITLE			DELETE	3.1 TITL		11-28			Change	Addition	
NAME		_		3.2 NAM				-			
STREET ADORESS				£		ADDRESS				ĺ	
CITY-ST-ZIP				3.4. CIT							
TITLE	·		DELETE	4.1 1111					Change	Addition	
NAME				4. 2 NA	ME				-		
STREET ADDRESS				4.3 STR	EET	ADDRESS					
CITY-ST-ZIP				4.4 C(T)	Y - ST	T- ZIP					
TITLE		L	DELETE	5.1 TITL					Change	Addition	
NAME				5.2 NAM	ΛE					į	
STREET ADDRESS				5.3 STR	EET /	ADDRESS				İ	
CITY-ST-ZIP				5.4 CIT	Y-ST	T-ZIP					
TITLE			DELETE	61 1(1)					Change	Addition	
NAME				62 NAM	ИE	j				J	
STREET ADDRESS				6.3 STR	EET /	ADDRESS	e en	es comment			
										I	

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.

Morgis A. LeCompte, Director