**FILED** 

Apr 29, 1999 8:00 am Secretary of State

04-29-1999 90217 023 \*\*\*150.00

## 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

## DOCUMENT # P96000010791

1. Corporation Name

PETER KEHOE & ASSOCIATES REAL ESTATE, INC.

Principal Place of Business Mailing Address					T \$00(100) ILE \$0(10 01)(1 E8(1) OU(1) OU	93181   811 931(  198	10 10101 1101 1861
2150 SOUTHEAST 17TH STREET 2150 SOUTHEAST 17TH STRE			EET				
SUITE 107 SUITE 107					DO NOT WRITE IN	THE CDACE	
FORT LAUDERDALE FL 33316 FORT LAUDERDALE FL 33316			}		3. Date incorporated or Qualifed	THIS SPACE	
					02/02/1996		
2 Daimain at Di	le ee of Business	2a. Mailing Address			4. FEI Number		Applied For
T 404 N. Pivoneide Poive			ide Drive		65-0653291	. —	lot Applicable
21 101 N. R1VerSIGE Drive 26 101 N. RIVE Suite, Apt. #, etc. Suite, Apt. #, etc.			Side Bille				Additional
— James Francis			• • •		5. Certifcate of Status Desired	,	Required
		City & State			6. Election Campaign Financing	\$5.0	May Be
	no Beach, Fl	28 Pompano Beach	, Fl		Trust Fund Contribution	Adde	to Fees
Zip	Country	Zip	Country		8. This corporation owes the current y		
33062	25 USA	29 33062 3	USA		Personal Property Tax.	☐ Yes	
	9. Name and Address of Current	Registered Agent	04	Manage	10. Name and Address of New Regis	tered Agent	
CANI	D DIDED VACUES INC		81	Name	•		
SAND PIPER YACHTS, INC. 2150 SOUTHEAST 17TH STREET					dress (P.O. Box Number is Not Acceptable)		
	E 107		83	<u> 101</u>	N. Riverside Drive		
	T LAUDERDALE FL 33316		83	Suit	e 123		
FUR	I DAUDENDALE PE 33316		84	City			Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes,				Pomp	ano Beach		3062
office or r	opietored agent or both in the State of	Florida, Such change was auti	ionzea by	the corpor	ation's board of directors. I hereby accept the	appointment as	registered
agent. I a	m familiar with, and accept the obligation	ons of, Section 607.0505, Florid	a Statutes				
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable (NOTE: P.	envetered Aner	t eigneture ren	uired when reinstating) D	ATE	·
12.	OFFICERS AND		13.	. orginatar a ray	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECT	ORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	-		XX Chang	e ☐ Addition
NAME	KEHOE, PETER		1.2 NAME		•		
STREET ADDRESS 2150 SOUTHEAST 17TH STREET, SUIT		r, suite 107	1.3 STREE	ADORESS	101 North Riverside Dri	ve Suite	123
CITY-\$T-ZIP	FORT LAUDERDALE FL 33316		1.4 CITY-S	r-ziP	Pompano Beach, Fl 3306	2	
TITLE		☐ DELETE	2.1 TITLE		•	☐ Chang	Addition
NAME			2.2 NAME	1			
STREET ADDRESS			2.3 STREET	ADDRESS			
CITY-ST-ZIP			2.4 CITY-S	T-ZIP			
TITLE		☐ DELETE	3.1 TITLE		• .	☐ Chang	Addition
NAME .	. ~		3.2 NAME	Ī	· ·	- ·	
STREET ADDRESS			3.3 STREE	ADDRESS			
CITY-ST-ZIP			34. CITY-5	T-ZIP		☐ Chang	e
TITLE		☐ DELETE	41 TITLE	ì		C Chang	e [[Vacunoii
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP	·	☐ DELETE	4.4 CITY-S 5.1 TITLE	r-ZIP		Chang	e 🗍 Addition
TITLE		C) DELETE	5.1 IIILE 5.2 NAME		. •		
NAME	·		5.3 STREE	ADDRESS	rates C - c ass		
STREET ADDRESS			5.4 CITY-S				
CITY-ST-ZIP		DELETE	6.1 TITLE	+		· Chang	e Addition
III LE	1						
NAME			6.2 NAME				

CITY-ST-ZIP 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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS