Applied For Not Applicable

\$8.75 Additional

Fee Required \$5.00 May Be

Added to Fees

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

**PROFIT** CORPORATION ANNUAL REPORT

1999

FT. MYERS BEACH FL 33931



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90042 016 \*\*\*150.00

## DOCUMENT # DOCOMO17201

1. Corporation REAL VES	ST PROPERTIES INC.						
Principal Place	of Business	Mailing Addres	s				
17953 SAN CARI FT. MYERS BEAU US		P.O. BOX 6926 FT. MYERS BEACH FL 33911 US					DO NOT WRITE I
00		•				3.	Date Incorporated or Qualifed
						İ	02/23/1996
2. Principal Pla	ce of Business	2a. Mailing Add	Iress			4.	FEI Number
21		26					65-0645681
Suite, Apt. #	, etc.	Suite, Apt. a	ŧ, etc.			5.	Certificate of Status Desired
City & State		City & State	•			6.	Election Campaign Financing Trust Fund Contribution
Zip	Country 25	Zip	Co	untry		8.	This corporation owes the current y Personal Property Tax.
24	9. Name and Address of Cu			Π		10.	Name and Address of New Regi
DOMI	NIC, STEVEN			81	Name		
	S SAN CARLOS BLVD			82	Street Add	fress (F	P.O. Box Number is Not Acceptable

DO NOT WRITE IN THIS SPA	DO NOT	WRITE	IN THIS	SPAC
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8. This corporation owes the current year Intangible

10. Name and Address of New Registered Agent

			84	City		FL 85	Zip Co	de
office or re	to the provisions of Sections 607.0502 ar egistered agent, or both, in the State of F m familiar with, and accept the obligations	lorida. Such change was auth	onzed by	the corpo	corporation submits this statement for the purpo pration's board of directors. I hereby accept the a	se of changir appointment	ng its re as regis	gistered tered
SIGNATURE								
	Signature, typed or printed name of registered agent and			t signature re	equired when reinstating) DA		-0700	20140
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICER			
TITLE	P	☐ DELETE	1.1 TITLE			☐ Cha	ange	Addition
NAME	DOMINIC, STEVE		1.2 NAME					
STREET ADDRESS	17953 SAN CARLOS BLVD		1.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. MYERS BEACH FL 33931		1.4 CITY-S	T- ZIP				
TITLE	VP	☐ DELETE	2.1 TITLE			Cha	ange	☐ Addition
NAME	DOMINIC, KIMBERLY		2.2 NAME	<u> </u>				
STREET ADDRESS	ATORE CAME CARLOS BLUE		2.3 STREET	ADDRESS				
CITY-ST-ZIP	FT. MYERS BEACH FL 33931		2. 4 CITY-S	T-71P	-			
TITLE	TI. MITERIO DEACTITE COOST	☐ DELETE	3.1 TITLE			☐ Cha	ange	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP			3.4. CITY-S	T-ZIP				
TITLE		☐ DELETE	4.1 TITLE	<del></del>		Ch	ange	Addition
NAME			4. 2 NAME	ļ				
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	5.1 TITLE			Ch:	ange	☐ Addition
NAME I			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Ch	ange	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	FADDRESS				
CITY-ST-ZIP .			6.4 CITY-S	T-ZIP				
44	416 44 - 4 46 - 1-6	to fillion along and according for the		an atatad	Lin Contine 110 07/2\/i\ Elorida Statutos I furth	or cortify that	the info	ormation

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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 informationate 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 or an attachypion with an address, with all other like empowered.

SIGNATURE:

941 433 4144

CR2E034 (11/98)