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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000020455 (7)

ARMSTRONG REAL ESTATE INSPECTION, INC.

FILED Feb 05 1998 8:00am Secretary of State



Distribution of Distribution o						<u> </u>
Principal Place of Business Mailing Address						
7350 TALONA AYE., STE. A MELBOURNE FL 32904		7350 TALONA AVE., 8TE. A Melbourne fl 32904		DO NOT WRITE IN THE	S SDACE	
					3. Date Incorporated or Qualified	3 31 AGE
					03/04/1996	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number	Applied For
	lace of Business	├ ┐	 			Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-3364201	\$8.75 Additional	
22		27		5. Certificate of Status Desired	Fee Required	
City & State		City & State		Election Campaign Financing		
23		28		Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country		8. This corporation owes or has paid the c	
24	25	- H '	30		Personal Property Tax due June 30.	Yes No
g. Name and Address of Current Registered Agent			-	10. Name and Address of New Registered Agent		
D.	YER, DAVID W		8	Name		
325 5TH AVE., STE. 205			_	1	(0.00	
	DIALANTIC FL 32903		6:	2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
INUIALANTIC PL 32903			6:	3		
			L			
			84	1 City	F	85 Zip Code
44 Durguent 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 agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE On the printed part of the printed part of the printed part and title if applicable (NOTE Registered Agent signature required when reinstating)						
12.		ID DIRECTORS	13.	·	ADDITIONS/CHANGES TO OFFICERS AN	ND DIRECTORS IN 12
TITLE	D	☐ DELETE	1 1 THLE			Change Addition
NAME	ARMSTRONG, DAVID		1.2 NAME			
STREET ADDRESS	MARA TALONIA ALE OTO 1		1.3 STREE	T ADDRESS		
CITY-ST-ZIP	MELBOURNE FL 32904		14 CITY-ST-ZIP			
TITLE			21 TITLE			☐ Change ☐ Addition
NAME		2				
STREET ADDRESS			2.3 STAFE	T ADDRESS		
CITY-ST-ZIP			2. 4 CITY			
TITLE			3 1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CHTY-ST-ZIP	•		3.4. CITY			
TITLE		DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME		_	4. 2 NAM			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			·
STREET ADDRESS				T ADDRESS		
			5.4 CITY-			
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME	· · · · · · · · · · · · · · · · · · ·		6.2 NAME			
			1			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP	<u> </u>		6.4 CITY -	ST-ZIP		

14. Thereby certify that the information supplied with the 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 agricultation of the control of the co

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