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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000027592 (0)

PREFERRED REAL ESTATE GROUP, INC.

FILED Apr 14 1997 8:00am Secretary of State



Principal Place of Business Mailing Address 101 CENTURY 21 DRIVE. SUITE 105 JACKSONVILLE FL 32216-9255 JACKSONVILLE FL 32216-92										
							3. Date Incorporated or Qualified 03/29/1996	3a. Da	ite of Last R	eport
2. Principal	Place of Business	2a. Mailing	Address				4. FEI Number		Ar	oplied For
21		26					59-3371383			ot Applicable
Suite, Ap		27	Apt #, etc.				5. Certificate of Status Desired			Additional equired
City & St. 23		City & 5 28	State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
- γ Z _i p	Country Zip			Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 9. Name and Address of Current Registered Agent			30			Florida Statutes Yes X No 10. Name and Address of New Registered Agent			
	ENNINGS, JUDITH C	rent Hegistereo Af	gent		1	Name	10. Name and Address of New He	Biareted (rgeni	
1	01 CENTURY 21 DRIVE, SUITE	105		L			ess (P.O. Box Number is Not Acceptat	ole)		····
J	ACKSONVILLE FL 32216-9255			6	3					
				8	4	City		 1	85 Zip (Code
44 6	6077	NECO 1 007 1000	Florido Crasa	455 555			oration submits this statement for the pion's board of directors. I hereby accept	FL		to reciptored
SIGNATURE	Stiplature, typed or peaks transe of my slered		e (NOT	E: Registered A	vgeni		ed when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	DIRECTOR	RS IN 12
Tall, F NAME STREET ADDRESS	JENNINGS, JUDITH C	SUITE 105	DELETE	1.1 TITLE 1.2 NAMI 1.3 STRE	E	ADORESS			L Change	L Addition
City-St ZiP	JACKSONVILLE FL 32216-	9255		1.4 CITY						
TITLE			☐ DELETE	2.1 TITLE					Change	Addition
NAME				2.2 NAM	E	Ì				1
\$1FEET ADDRESS	S.			2.3 STRE	ET A	ADDRESS				
CHY-ST-7IF				2. 4 CITY	/- \$T	r-ZIP				
TULF			☐ DELETE	3.1 TITLE					☐ Change	Addition
NAME				3.2 NAM	-					
STREET ADDRESS	5			33 STRE		1				
CHY ST-ZP			Dorte	3 4. CITY	_	-ZIP			Channa	Addition
111.6			∐ DELETE	4.1 T)TLE					Change	Addition
NAM+				4. 2 NAM		I DODE CO				
STREET ACCIE: 50	`			4.3 \$TRE						
CHY-SI-ZIP TiffE			DELETE	4.4 CHTY 5.1 TITLE		- 215		·····	Change	Addition
NAME			PECELL	5.2 NAM						
İ	e			5.2 NAM 5.3 STRE		nnacce				•
STREET ASSURES!	2									
COLY - ST - ZIP			DELETE	5.4 CITY 6.1 TITLE		- ZIF			Change	Addition
NAME				6.2 NAM		1			— v.m./go	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS	6			6.3 STRE		223900				ļ
İ	<i>,</i>									
DITY ST 7-2	.]			6.4 CHTY	- 51	-zir	1 0 1 40 07/010 El 11 01			

Edulaterly 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

SIGNATURE: