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 # P96000027592

PREFERRED REAL ESTATE GROUP, INC.

Principal Place of Business

Mailing Address

FILED Apr 13, 1999 8:00 am Secretary of State

04-13-1999 90104 013 ***150.00



101 CENTURY 21 DRIVE. SUITE 105 JACKSONVILLE FL 32216-9255		101 CENTURY 21 DRIVE. SUITE 105 JACKSONVILLE FL 32216-9255		DO NOT WRITE IN THIS S	PACE	
	•	,		3. Date Incorporated or Qualifed 03/29/1996	,	
2. Principal Pl	ace of Business	2a. Mailing Address	0	4. FEI Number		olied For
21 3930	SAN JOSE PARK DC	26 3930 SAN JOSE PARK DR.		59-3371383		Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27 VACKSONVILLE, FL		5. Certificate of Status Desired	Fee Required	
City & State 23 プンス/	e /	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip 24	Country 25 OUVAL	zip 322/7 30	Country DUVAL		Yes Yes	□No
9. Name and Address of Current Registered Agent 81 Name 1 10. Name and Address of New Registered Agent						
101 (INGS, JUDITH C CENTURY 21 DRIVE, SUITE 105	ENNINGS VUDITH C. ddress (P.O. Box Number is Not Acceptable) 930 SAN JOSE PARX DRIVE				
JAUN	(SONVILLE FL 32216-9255		83 84 City 1		85 Zjp (Code
			1 1 7 1	PEKSONVILLE FL	30	Dode 9217
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 (egistered 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 appointment of Section 607.0505, Florida Statutes.						
SIGNATURE Signature typed or printed name of signature agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE DATE						
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND		
TITLE	D	☐ DELETE	1.1 TIFLE	Pine to lunger	Change	☐ Addition
NAME	JENNINGS, JUDITH C		1.2 NAME	DENNINGS JUDITH C. 3930 JAN JOSE PARK DRIVE		
STREET ADDRESS	101 CENTURY 21 DRIVE, SUITE	105	1.3 STREET ADDRESS	3430 JAN JOSE PARK DRIVE		
CITY-ST-ZIP	JACKSONVILLE FL 32216-9255		1.4 CITY-ST-ZIP	JACKSONVILLE, FL. 32217		
TITLE		☐ DELETE	2.1 ΠΤLE		☐ Change	☐ Addition
NAME	•		2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS	•		1
CITY-ST-ZIP			2. 4 CITY+ST-ZIP			
TITLE		☐ DELETE	3.1 TITLE	,	☐ Change	☐ Addition
NAME	1		3.2 NAME			<u> </u>
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP		•	3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	☐ Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE		☐ Change	Addition
NAME			5.2 NAME			
STREET ADDRESS	•		5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		☐ DELETE	B.1 TITLE		Change	☐ Addition
NAME			6.2 NAME			.
STREET ADDRESS	1		6.3 STREET ADDRESS			

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 of 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 officer or director of the corpor Block 12 or Block 13 if shange

SIGNATURE