### SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



### FLORIDA DEPARTMENT OF STATE

#### Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

# DOCUMENT # P96000077836 (0)

FEDERAL ESTATE BUYERS, INC.

Principal Place of Business

Mailing Address

## FILED Aug 20 1997 8:00am Secretary of State



4215 TRANQUILITY DRIVE HIGHLAND BEACH FL 33487		4215 TRANQUILITY DRIVE HIGHLAND BEACH FL 33487		DO NOT WRITE	IN THIS S	PACE		
					3. Date Incorporated or Qualified 09/18/1996	<b>3a.</b> Da	te of Last	Report
2. Principal Pl	ace of Business	2a. Mailing Address	· .= -···· · ·		4. FEI Number	1		Applied For
21 504 S. FEDERAL Highway		26		65-0697225		<del></del>	Vot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	us Desired			
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	Zip Country		8. This corporation owes or has paid the current year Intangible				
24 3344		h	30		Personal Property Tax due June		_ ′	□ No
	9. Name and Address of Current F		. ]		10. Name and Address of New Reg		gent	
GE	RHOFF, PAULINE		81	Name		•		
	5 TRANQUILITY DRIVE		82 Street Add		ddress (P.O. Box Number is Not Acceptab	e)		
	HLAND BEACH FL 33487			Carbotine	saled ( .e. box Halliber b Het Accoptab			
			83					
			64	City			85 Zip	Code
						FL		
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 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 re-installing) DATE								
12.	OFFICERS AND (		13,	eni signalule re	ADDITIONS/CHANGES TO OFFIC		DIRECTO	PS IN 12
TITLE	D	DELETE	1.1 TITLE		1,55,7,67,67,67,67,67		Change	
NAME	GERHOFF, PAULINE		1.2 NAME				•	
STREET ADDRESS	4215 TRANQUILITY DRIVE		1.3 STREET	ADDRESS				
CITY-ST-ZIP	HIGHLAND BEACH FL 33487		1.4 CITY-5	ST-ZIP				
TITLE		☐ DELETE	2.1 TITLE				Change	Addition
NAME		2						ļ
STREET ADDRESS			2.3 STREET ADDRESS					1
CITY-ST-ZIP			2.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3 1 TITLE		-		Change	Addition
NAME :			32 NAME		· (	29		
STREET ADDRESS			3 3 STREET	ADDRESS				
CITY-ST-ZIP			3 4. CITY-	ST-ZIP				
TITLE		☐ DELFTE	4.1 TITLE				☐ Change	Addition
NAME	,		4. 2 NAME					
STREET ADDRESS			4.3 STREET	ADDRESS				
CITY-ST-ZIP		T 55.53	4.4 CITY - S	î1-ZIP				
TITLE	☐ DELETE		5.1 TITLE			1	∐ Change	L. Addition
NAME			5.2 NAME					İ
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP		Lacrete	5.4 CITY - S	II - ZIP				
TITLE		☐ DELETE	6.1 TITLE				L. Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STHEET					
City-St-ZiP	w certify that the information currelied w	ith this filing does not evalle	6.4 CHY-S		ted in Section 119.07(3)(i), Florida Statutes	I fugth o-	aartift	
information	n indicated on this annual report or sun	niomental annual report le tri	un and ann	ireta and th	at my signature shall have the same legal ort as required by Chapter 607, Florida St	effect as atutes; an	if mada u	nder eath, that