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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1**9**98

DOCUMENT # 1. Corporation Name P96000082096 (4)

REAL ESTATE LISTINGS BYFAX, INC.

Principal Place of Business Mailing Address 12471 SW 97 STREET^ PO BOX 160931 MIAMI FL 33186 MIAMI FL 33116 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0844233 Applied For 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country B. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9, Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name THE LAW OFFICE OF ELINA BANCIELLA 815 NW 57TH AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) SUITE 401 83 MIAMI FL 33126 84 City Zip Code 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. Ehereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature: Typed or pointed name of registered agout and tipe if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TITLE 1.1 TITLE Change Addition BANCIELLA, ROLANDO A NAME 1.2 NAME 12471 SW 97 STREET STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33186** CITY - ST - ZIP 1.4 CITY - ST- ZIP DELETE Change Addition TITLE 2.130TLE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DEI ETE TITLE ☐ Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3 4. CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 44 CITY-ST-ZIP DEL ETE Change TITLE 5.1 TITUE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling 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 is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or therecover or trustee employed 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 argument with an addition.

5.4 CITY - ST- ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

CICNIATURE.

CITY - ST - ZIP

CITY-ST-7IP

TITLE

NAME STREET ADDRESS

4-28-98 (305)271-2755

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***150.00

Change

Addition

FILED

Jul 07 1998 8:00am

Secretary of State