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 # PARAMANAT (3)

	GAN REALTY & PROPERTY						
Principal Place of Business 3999 SOUTH CONGRESS AVENUE SUITE 105 LAKE WORTH FL 33461		Mailing Address			*** ***** ***** ***** ****	137 I VE 1 IVE1	
		3939 SOUTH CONGRESS AVENUE SUITE 105 LAKE WORTH FL 33461			DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified		
2 Principal F	Place of Business	2a. Mailing Address			11/01/1996		
21		26			4. FEI Number	<u> </u>	oplied For
Suite, Apt.	#, etc	Suite, Apl. #, etc.		65-0722406	¢0.75	ot Applicable Additional	
22		27		5. Certificate of Status Desired		equired	
City & State		City & State		6. Election Campaign Financing		May Be	
23 Zip	Country	28]	Counts		Trust Fund Contribution		to Fees
24	25	Ζιρ 29	Country 30	/	This corporation owes or has pa Personal Property Tax due June		langible Do
	9. Name and Address of Curren		[30]		10. Name and Address of New Re		
FL	ANAGAN, THERESE		81	Name			
	39 SOUTH CONGRESS AVENUE		82 Street Add		fress (P.O. Box Number is Not Acceptab	nle)	
	NTE 105						
į LA	KE WORTH FL 33461	83					
			84	City		85 Zip	Code
11. Pursuant	to the provisions of Sections 607.050	2 and 607, 1508, Florida Statute	es, the above	e-named cor	poration submits this statement for the r	FL S Zip (s registered
agent. La SIGNATURE					poration submits this statement for the patients board of directors. I hereby acception's board of directors is the second of directors.	of the appointment as	registered
12.	Supporture typical or printed name of nightness and OFFICERS AND		Begistered Age	eni a gnature requ	irod when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	O IN 40
TITLE	DPVT	NE F. W. C			ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	FLANAGAN, THERESE		1.2 NAME				
STREET ADDRESS 3939 S CONGRESS AVE, ST		E 105	1.3 STREET ADDRESS				
CITY-SI-ZIP	LAKE WORTH FL		1.4 CITY - S	T-ZIP			
TITLE	DELETE		2.1 TITLE			Change	☐ Addition
NAME STREET ADDRESS			2 2 NAME	4000000			
CITY-SI-ZIP			2.3 STREET 2.4 City-5	i i			
TITLE	DELETE		3.1 TITLE	51 - 211		Change	Addition
NAME			3.2 NAME			CC Charles	
STREET ADDRESS			3.3 STREET	ADDRESS			
CITY-ST-ZIP			3.4 CITY-5	ST - 21P			
TITLE	DELETE					☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS			4.3 STREET				
CITY-ST-ZIP TITLE	DELETE			1-2IP		Change	Liddition
NAME		Early Section 1	5 1 TITLE 5 2 NAME			L Change	☐ Addition
STREET ADDRESS			5 3 STREET	ADDRESS			
CITY-ST-7IP			5.4 CITY-S				
TITLE		DELETE	6.1 TITLE			Change	Addition
****						•	ŀ

14. 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 or suppliemental 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 Block 12 or Block 13 if changed, or man all achiment with an address?

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Apr 22 1998 8:00am

Secretary of State