

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

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90295 006 ***158.75

DOCUMENT # P96000092353

1 Corporation Name REALLY INC.

Principal Place of Business

1401 KINGSLEY AVE ORANGE PARK FL 32073 US

Mailing Address

C/O DAVID A. KING, ATTORNEY 1416 KINGSLEY AVE. ORANGE PARK FL 32073

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/12/1996

4. FEI Number

59-3410616

Applied For Not Applicable

5. Certificate of Status Desired



\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution



\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax



No

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

25

29

30

9. Name and Address of Current Registered Agent

DALTON, PETER O 1401 KINGSLEY AVE. ORANGE PARK FL 32073

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P O Box Number is Not Acceptable)

83

84 City

FL

85 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. 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. Attachments, if any.

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 NAME D [] DELETE 221 STREET ADDRESS 2201 ASTOR STREET, UNIT 14 23 CITY, ST, ZIP ORANGE PARK FL 32073

11 TITLE [] Change [] Addition 12 NAME 13 STREET ADDRESS 14 CITY, ST, ZIP [] Change [] Addition

1 NAME [] DELETE 221 STREET ADDRESS 23 CITY, ST, ZIP [] Change [] Addition

21 NAME 22 STREET ADDRESS 23 CITY, ST, ZIP [] Change [] Addition

1 NAME [] DELETE 221 STREET ADDRESS 23 CITY, ST, ZIP [] Change [] Addition

31 TITLE [] Change [] Addition 32 NAME 33 STREET ADDRESS 34 CITY, ST, ZIP [] Change [] Addition

1 NAME [] DELETE 221 STREET ADDRESS 23 CITY, ST, ZIP [] Change [] Addition

41 TITLE [] Change [] Addition 42 NAME 43 STREET ADDRESS 44 CITY, ST, ZIP [] Change [] Addition

1 NAME [] DELETE 221 STREET ADDRESS 23 CITY, ST, ZIP [] Change [] Addition

51 TITLE [] Change [] Addition 52 NAME 53 STREET ADDRESS 54 CITY, ST, ZIP [] Change [] Addition

1 NAME [] DELETE 221 STREET ADDRESS 23 CITY, ST, ZIP [] Change [] Addition

61 NAME 62 STREET ADDRESS 63 CITY, ST, ZIP [] Change [] Addition

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 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [Signature] SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR