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

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	REALTY WEST, INC.	1101316 (3)			## ###################################	
Principal Plac	e of Business	Mailing Address		a chaireas and latin arith agill Chill SRI	AN 11811 START 11888 STAR TARES BY 1 1218	
TOI-PROMEN	ADE DRIVE	701 PROMENADE DRIVE				
PENDONE D	NILITA PL 05000	S UITE-208		DO NOT WOITE	INITING COACE	
PEMPRONE P	NNES FL 33026	PEMBROKE PINES FL 330	26	DO NOT WRITE 3. Date Incorporated or Qualified	3a. Date of Last Report	
					oa. Date of Last Report	
2. Principal P	Place of Business	2a. Mailing Address		12/16/1996 4. FEI Number	Applied For	
21 555		126 5556 S. FL	AMINGO ROAD		Not Applicable	
Suite, Apt.		Suite, Apt. #, etc.			SR 75 Additional	
22	<u> </u>	27		5. Certificate of Status Desired	Fee Required	
City & Stat		City & State	A	6. Election Campaign Financing	\$5.00 May Be	
	SPECITY, FL.	28 COOPER CI		Trust Fund Contribution	Added to Fees	
ر د د ^{ات} م	330 25 BROWARD	Zip	Country	8. This corporation owes or has pai		
24 75	9. Name and Address of Current		30 BROWARD			
<u> </u>		Hegistered Agent	81 Name	10. Name and Address of New Reg	distated wasti	
	MB, ALEXANDER L ESQUIRE					
5550 S. Plamingo ro ad G ooper City fl. 88880-				701 AROHENADE DRIVE		
			83			
			°' S	UITE LOD		
			94 City		FL 85 Zip Code	
			1767	ABROKE PINES poration submits this statement for the pi		
agent. I a SIGNATURE	Signature, typod or printed frame of registered ago.	and little if applicable (NOTE	Rugiclered Agent's gnature requ		//8/97	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PSD PAGE	DELETE	1.1 TITLE		Change Addition	
NAME :	ROSE, DAVID		1.2 NAME			
STREET ADDRESS	7979 MIRAMAR PARKWAY		1.3 STREET ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33023		1.4 CITY-ST-ZIP			
TITLE	VID	☐ DELETE	2.1 TITLE		Change Acidition	
NAME	ROSE, JEANNE		2.2 NAME			
STREET ADDRESS	7979 MIRAMAR PARKWAY		2.3 STREET ADDRESS			
CITY-ST-ZIP	MIRAMAR FL 33023		2. 4 CITY - ST - ZIP			
TITLE	VICE PRESIDENT	DELETE	3.1 TIFLE	VICE PRESIDENT	Change Addition	
NAME			3.2 NAME	GRACE VIG	10	
			3.3 STREET ADDRESS	1531 N.W. 11474 A		
CITY-ST-ZIP			3.4. CITY - ST - ZIP	PLONGROKE PIMES, FL.	33026	
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			

6.3 STREET ADDRESS 6.4 CITY - ST-ZIP 14. I do 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 some legal effect as if made under eath, that I am an officer or director of the virporation or the receiver or mystoe empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

FILED Sep 10 1997 8:00am Secretary of State

Change

Addition