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

DOCUMENT # **P97000000496**1. Corporation Name

NAME

STREET ADDRESS

CITY-ST-ZIP

TOMORROWS REALTY, INC.

Principal Place of Business Mailing Address							,
2029 NW 46 AVENUE 403E 2029 NW 46 AVENUE 403E LAUDERHILL FL 33313 LAUDERHILL FL 33313						DO NOT WRITE IN THIS SPACE	
						3. Date Incorporated or Qualifed	\neg
						01/01/1997	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number Applied For	\neg
21 26						65-0715922 Not Applicable	e
Suite, Apt. #, etc. Suite, Apt. #, etc.						\$8.75 Additional	\neg
22 27						5. Certificate of Status Desired Fee Required	
City & State City & State						6. Election Campaign Financing 55.00 May Be	
23						Trust Fund Contribution Added to Fees	
Zip				/		8. This corporation owes the current year Intangible	- 1
24	25 29 30					Personal Property Tax. ☐ Yes ☐ No	
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent	_
T. 100	NONEST LOIC		81	1	Name		
TURNQUEST, LOIS			82	12 Street Address (P.O. Box Number is Not Acceptable)		コ	
2029 NW 46 AVENUE 403E LAUDERHILL FL 33313			00	92			_
100	DET II II I E 000 10		83	1			
			84	84 City		FL 85 Zip Code	
11 Pursuant	to the previsions of Sections 607.0502	2 and 607.1508, Florida Statutes	, the above	e-n	named corpor	ration submits this statement for the nurnose of changing its registered	
l office or r	egister agent, or both, in the State of m farthar with, and accept the obligat	nt Florida. Such change was auth	าดประชายง	' tne	e corporation	's board of directors. I hereby accept the appointment as registered	
	M - hous T	THOQUE ST				4/21/99	
				Registered Agent signature requi		when reinstating) DATE	
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	_
TITLE	PTD	☐ DELETE	1.1 TITLE		ŀ	☐ Change ☐ Addit	on
NAME	TURNQUEST, LOIS		1.2 NAME				
STREET ADDRESS			1.3 STREE	TAE	DDRESS		
CITY-ST-ZIP	LAUDERHILL FL 33313		1.4 CITY-S	ST-Z	ŢIP	Chance D'Addit	
TITLE	VP	☐ DELETE	2.1 TITLE			☐ Change ☐ Addit	OII
NAME	Side Education in the side of		2.2 NAME				
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CITY-ST-ZIP				3.4. CITY-ST-ZIP		☐ Change ☐ Addit	ion
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NAME			5.2 NAME		222522		
STREET ADDRESS			5.3 STREE				
CITY-ST-ZIP				5.4 CITY-ST-ZIP 6.1 TITLE		☐ Change ☐ Addit	
TITLE		☐ DELETE	0.1 HILE		ĺ	☐ Change ☐ Addit	J61

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 outh; 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 chapter 607, or on an attachment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE OFFICER OR DIRECTOR

FILED

May 06, 1999 8:00 am Secretary of State

05-06-1999 90292 003 ***750.00