

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 # P97000001615

1. Corporation Name

REALPERFORM, INC.

Principal Place of Business

15970 SR #84
STE 186
SUNRISE FL 33326
US

Mailing Address

15970 SR #84
STE 186
SUNRISE FL 33326
US

2. Principal Place of Business

2a. Mailing Address

21 8930 S.R. #84

26 8930 S.R. #84

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE 107

27 SUITE 107

City & State

City & State

23 DAVIE, FL

28 DAVIE, FL

Zip

Zip

24 33324

Country

Country

25 BROWARD

29 33324

Country

30 BROWARD

9. Name and Address of Current Registered Agent

MURRAY, DONALD G
275 N.W. 157TH STREET
MIAMI FL 33169

SAME
ADDRESS
CHANGE
ONLY

10. Name and Address of New Registered Agent

81 Name DONALD G. MURRAY
82 Street Address (P.O. Box Number is Not Acceptable)
9851 N.W. 52ND LANE
83
84 City MIAMI FL 85 Zip Code 33178

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 when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PSD	<input type="checkbox"/> DELETE
NAME	CONNER, RICHARD E	
STREET ADDRESS	15970 S.R. #84, STE. 186	
CITY-ST-ZIP	SUNRISE FL 33326	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PSD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	RICHARD B. CONNER	
1.3 STREET ADDRESS	8930 S.R. #84, SUITE 107	
1.4 CITY-ST-ZIP	DAVIE, FL 33324	
2.1 TITLE	VT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	JEANNE R. CONNER	
2.3 STREET ADDRESS	8930 S.F. #84 SUITE 107	
2.4 CITY-ST-ZIP	DAVIE, FL 33324	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/99

(954) 582-9232

Daytime Phone #

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90193 004 ***158.75



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/02/1997

4. FEI Number

65-0723275

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.

☐ Yes ☒ No

CR2E034 (1/98)