PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000004421

PALM BEACH COMMERCIAL INVESTMENT REALTY, INC.

Principal Place of Business 1803 S. AUSTRALIAN AVE., SUITE A WEST PALM BEACH FL 33409

Mailing Address

1803 S. AUSTRALIAN AVE., SUITE A WEST PALM BEACH FL 33409

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90058 030 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

					01/09/1997			
2 Principal Pl	Principal Place of Business 2a. Mailing Address				4. FEI Number	Apr	olied For	
34	26				65-0722244	. Not	Applicable	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.					\$8.75 A	dditional	
27					5. Certifcate of Status Desired	Fee Red	uired	
City & State City & State					6. Election Campaign Financing	\$5.00	May Be	
23 28					Trust Fund Contribution	Added to		
Zip	Country Zip				8. This corporation owes the current year I	ntangible		
24	25 29				Personal Property Tax.	Yes	□No	
1	9. Name and Address of Curre				10. Name and Address of New Registere	d Agent		
			81	Name				
HODGES, LARRY W 1803 SO ASTRALIAN AVE SUITE A WEST PALM BEACH FL 33409				82 Street Address (P.O. Box Number is Not Acceptable)				
				82 Street Address (P.O. Box Number is Not Acceptable)				
							-	
					<u> </u>		· · · · · · · · · · · · · · · · · · ·	
			84	City	F	85 Zip C	ode	
		502 CO7 1509 Florida Chatuto	a the about	named corr	poration submits this statement for the purpose	_	registered	
office or n	egistered agent, or both, in the Stat	e of Florida. Such change was au	ithorized by	the corporati	ion's board of directors. I hereby accept the app	ointment as rec	istered	
agent. I a	m familiar with, and accept the obli-	gations of, Section 607.0505, Flori	ida Statutes	•				
SIGNATURE					ed when reinstation) DATE			
	Signature, typed or printed name of registered a	,		t signature require	30 Wildin Tollicability)	ND DIRECTO	DS IN 12	
12.	OFFICERS AND DIRECTORS DELETE		13.		ADDITIONS/CHANGES TO OFFICERS A	☐ Change	Addition	
TITLE	_		1.1 TITLE 1.2 NAME			Onlinge		
NAME	HODGES, LARRY W							
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP	WEST PALM BEACH FL 3340		1,4 CITY-S	T- ZIP				
TITLE		☐ DELETE	2.1 TITLE			☐ Change	Addition	
NAME			2.2 NAME		•			
STREET ADDRESS	•		2.3 STREET	T ADDRESS		*	•	
CITY-ST-ZIP			2. 4 CITY-S	T-ZIP	,			
TITLE		☐ DELETÉ	3.1 TITLE		1	☐ Change	☐ Addition	
NAME			3.2 NAME	-	The state of the s	- ·		
			3.3 STREE	T ANDRESS				
STREET ADDRESS								
CITY-ST-ZIP		☐ DELETE	3.4. CITY-S 4.1 TITLE	21-215		Change	Addition	
TITLE				1		,		
NAME			4, 2 NAME					
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP		[] no. ex-	44 CITY-S	T-ZIP		Change	Addition	
TITLE		☐ DELETE	5.1 TITLE			□ cuange	L YOURDII	
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE	TADDRESS	,			
CITY-ST-ZIP			5.4 CITY-S	T-ZIP				
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition	
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	ADDRESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP				
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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: