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 90260 045 ***150.00

DOCUMENT # P97000011100

1. Corporation Name

KATHERINE TUSTIN REALTY INC.

Principal	Place	of	Business	

Mailing Address

499 E. PALMETTO PARK ROAD **BOCA RATON FL 33432**

499 E. PALMETTO PARK ROAD BOCA RATON FL 33432



DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed

						02/04/1997					
2. Principal Pl	lace of Business	2a. Mailing Address			4	, FEI Number		-	Applied For		
17751	17751 Candleward TSR. 28 SAME				65-0726088		1	Not Applicable			
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			_	0-25-4-460-4-8-1-4	\Box	\$8.75	Additional			
22		27			5	, Certifcate of Status Desired		Fee F	Required		
City & State	e	City & State			6	, Election Campaign Financing		\$5.00	May Be		
23 DOCA RATON FL. 28						Trust Fund Contribution			d to Fees		
Zip Country Zip Court				у	8	. This corporation owes the cu	rrent year Int	angible	,		
24 33 X 8	7 25 Palm 88AC4	2 29 30	5			Personal Property Tax.		☐ Yes	⊠ No		
	9. Name and Address of Current	Registered Agent			10	Name and Address of New	Registered	Agent	/		
		1	8	1 Name	•						
TUSTIN, KATHERINE				82 Street Address (P.O. Box Number is Not Acceptable)							
17751 CANDLEWOOD TERR.			"	Guest Address (F.O. Dox Mainber is Not Acceptable)							
BOC	A RATON FL 33487		8	83							
						· · · · · · · · · · · · · · · · · · ·					
			8	4 City			FL	85 Zip	p Code		
44 - Division and	to the provisions of Sections 607.0502	and 607 1509 Florida Statutes	the abo	Va-nama	d cornoratio	on submits this statement for the		changing i	its registered		
office or n	egistered agent, or both, in the State of	of Florida. Such change was auth	orized b	y the cor	poration's b	poard of directors. I hereby acce	ept the appoi	intment as	registered		
agent. I a	m familiar with, and accept the obligat	ions of, Section 607.0505, Florida	a Statute سسہ	:S. • •			-101				
SIGNATURE	Karkertine Tus	LW Katherine	Tus	tin_			5/0	99			
	Significant typed or printed name of registered agent			ent signature	required when	ADDITIONS/CHANGES TO O	TELCEDS AN	ID DIRECT	FORS IN 12		
12.	OFFICERS AND	D DIRECTORS DELETE	13.		<u> </u>	ADDITIONS/CHANGES TO O	FFICERS AI	Change			
TITLE	D DIOTIN WATHERINE	·									
NAME	TUSTIN, KATHERINE		1.2 NAME		.				1		
STREET ADDRESS	17751 CANDLEWOOD TERR.	1		ET ADDRES	s						
CITY-ST-ZIP	BOCA RATON FL 33487		1.4 CITY-		-				- A 1400		
TITLE		☐ DELETE	2.1 TITLE					Change	e		
NAME			2.2 NAME								
STREET ADDRESS	DORESS 2.3 ST			ET ADDRES	8						
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP							
TITLE		☐ DELETE	3.1 TITLE					Change	e 🔲 Addition		
NAME			3.2 NAME		1						
STREET ADDRESS			3.3 STRE	ET ADDRES	s						
CITY-ST-ZIP			3.4. CITY	ST-ZIP	1 .						
TITLE		☐ DELETE	4.1 TITLE					Change	e		
NAME			4. 2 NAM	Ē							
STREET ADDRESS			4.3 STRE	ET ADDRES	5						
CITY-ST-ZIP			4.4 CITY-	ST-ZIP							
TITLE		☐ DELETE	5.1 TITLE		+			☐ Chang	e Addition		
NAME			5.2 NAME					_ •			
		1	5.3 STRF	ET ADDRES	s						
STREET ADDRESS			5.4 CITY-								
CITY-ST-ZIP		☐ DELETE	6.1 TITLE		+			☐ Change	e Addition		
TITLE			6.2 NAME					cang			
NAME											
STREET ADDRESS		,		ET ADDRES)						
CITY-ST-ZIP			6.4 CITY	ST-ZIP	<u> </u>	440.07(0)(0) =1 :1 0:4 1					

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 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:

≣::