

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000021185 (8)

1. Corporation Name
REALBLOC, INC.

Principal Place of Business	Mailing Address
3785 NW 82ND AVE., STE. 201 MIAMI FL 33166	3785 NW 82ND AVE., STE. 201 MIAMI FL 33166



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 1655 W 44 PLACE		26 782 NW LeJeune Rd		03/07/1997	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22 OFFICE		27 STE 548		65-0736977	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23 Hialeah FL		28 Miami FL		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip		Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24 33012		29 33126			

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MARQUEZ, JOSE M 782 NW LEJEUNE RD., STE. 548 MIAMI FL		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

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 reinstalling)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	Same <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUERRA, ARMANDO J	1.2 NAME	Same
STREET ADDRESS	3785 NW 82ND AVE., STE. 201	1.3 STREET ADDRESS	9475 Journey's End Road
CITY-ST-ZIP	MIAMI FL 33166	1.4 CITY-ST-ZIP	Coral Gables, Florida 33156
TITLE	D	2.1 TITLE	Same <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUERRA, MARIA C	2.2 NAME	Same
STREET ADDRESS	3785 NW 82ND AVE., STE. 201	2.3 STREET ADDRESS	9475 Journey's End Road
CITY-ST-ZIP	MIAMI FL 33166	2.4 CITY-ST-ZIP	Coral Gables, Florida 33156
TITLE		3.1 TITLE	P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	FRANK Siberio
STREET ADDRESS		3.3 STREET ADDRESS	1655 W 44 PLACE
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Hialeah FL 33012
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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, 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.

SIGNATURE: FRANK Siberio 4-2-98 (305) 558-8389

CR2E034 (10/97)