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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 11 1998 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000024952 (8)

REALTY DEPOT USA, INC.

Principal Place of Business Mailing Address					C 1201261 LIG (01) (02) ABILI ABILI ABILI ABILI ABILI SIDIR (61) ABILI ANIA 1101 (60)	
	ITHWEST 21ST STREET RIN gs FL 33071-5739		1304 NORTHWEST 21ST STREET ORAL SPRINGS FL 33071-5739			DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualified 03/19/1997
	Place of Business	2a, Mailing Address	ı, Mailing Address			4. FEI Number Applied For
21		26	Color And Hoster			66-074111E Not Applicable
Suite, Apt.	#, 6 1C.	h	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional
22 City & State		City & State	City & State			Fee Required
		28	1			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country		Zip	1 _ · _ · _ · · · · · · · · · · · · · ·			This corporation owes or has paid the current year Intangible
24	25 29		30			Personal Property Tax due June 30. Yes No
	Name and Address of Currer					10. Name and Address of New Registered Agent
G	RIMM, PATRICK D		8	31	Name	
. 1	1304 NORTHWEST 21ST STREE	T	l	32	Street Ac	Address (P.O. Box Number is Not Acceptable)
CORAL SPRINGS FL 33071-5739			Ľ			The state of the s
			8	33		
			}	34	City	85 Zip Code
						FL 2 2 2 2 2 2 2 2 2
11. Pursuant	to the provisions of Sections 607.050	02 and 607.1508, Florida Statute	es, the abo	ove-	-named co	corporation submits this statement for the purpose of changing its registered
office or rogistered a cent, 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 fairly and accept the obligations of Spation 607.0505, Florida Statutes.						
SIGNATURE	1700-	PATRICK DC				4/27/98
	Significate, typod or pointed name of registered up			Agen	! signature re	required when reinstating) DATE
12.	BT OFFICERS AN	D DIRECTORS DELETE	13.		·· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	Dereck Consider Di		1.2 NAM			C oneign C radiitor
STREET ADDRESS	1304 NW 21 ST				ADDRESS	
CITY-ST-ZIP	Corcl Springs & 3257	1	4			
TITLE			1.4 CITY-ST-ZIP 2.1 TITLE		- 211	Change Addition
NAME			2.2 NAME		1	_ • _
STREET ADDRESS			2.3 STREET ADDRESS		ADDRESS	
CITY-ST-ZIP			2. 4 CITY - S1 - ZIP		- ZIP	
TITLE		☐ DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS		DDRESS	
CITY-ST-ZIP	CITY-ST-ZIP		3.4. CITY - \$1 - ZIP		- ZIP	
TITLE	DELETE		4.1 11116	4.1 TITLE		☐ Change ☐ Addilion
NAME			4, 2 NAN			
STREET ADDRESS	Í				ADDRESS	
CITY-ST-ZHP	`````````````````````````````````````		4.4 CITY - ST - ZIP		- ZIP	☐ Change ☐ Addition
TITLE			5.1 THEF		\	L. Change L. Addition
NAME OTREET APPRICES	NAME STREET ADDRESS		5.2 NAME		I DODECC	
			5.3 STREET ADDRESS		l l	
CITY-ST-2IP			5.4 CITY-ST-ZIP		-zir	Change Addition
NAME		☐ DELFTE	6.2 NAM			- Compt
STREET ADDRESS					ADDRESS	
CITY-ST-2P			6.3 CITY		Į.	
44 I beroby	certify that the information supplied w	with this filing does not qualify fo	or the even	nnti	hotela coi	d in Section 119.07(3)(i), Florida Statutes. I further certify that the information
indicated on this annual report or semptionental 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 of 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, over an attachment with an address.						