**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P97000028894

1. Corporation Name PRIMERO REALTY INC.

Principal Place of Business

4020 80 AVE N

Mailing Address

4020 80 AVE N

## May 05, 1999 8:00 am Secretary of State

05-05-1999 90212 040 \*\*\*150.00



PINELLAS PARK	FL 33781	PINELLAS PARK FL 33781						DO NOT WRITE IN THIS SPACE			
T MEEDIO T FIN	1 2 00/01							3. Date Incorporated or Qualifed 03/28/1997			
2. Principal Pl	ace of Business		2a. Mailing	Address				4. FEI Number		Ar	plied For
21	•		26					59-3480421		No	ot Applicable
Suite, Apt.	# etc.			pt. #, etc.						\$8.75	Additional
22			27					5. Certifcate of Status Desired		Fee R	equired
City & State		City & State				73	6. Election Campaign Financing		\$5.00	May Po	
23			28					Trust Fund Contribution		Added	
Zip	_ <del>`</del>	ountry	Zip		Country	,		8. This corporation owes the curr	ent year Int		<del></del> -
— ·	25	ound y	29	٦.	30			Personal Property Tax.	cin your inc	Yes	□No
24		Address of Current F			JU		_	10. Name and Address of New F	Registered	Agent	
	3, Harrie And /	tudiesa or ourient i	redistrict via		81	Name		10.			
RODI	RIGUEZ, LUIS A										
	80 AVE N					82 Street Address (P.O. Box Number is Not Acceptable)					
SUITE 3					100	<b>}</b>					
	LLAS PARK FL	22701			83						
FINE	LLAS PARK FL	33/01			84	City			FL	85 Zip	Code
agent. I ar SIGNATURE	m familiar with, an	d accept the obligation	ns of, Section (	607.0505, Flori	da Statutes	<b>.</b>		n's board of directors. I hereby acception when reinstating)	DATE		
	aignature, typed or print	OFFICERS AND		(4072.1	13.			ADDITIONS/CHANGES TO OF	FICERS AN	ND DIRECTO	DRS IN 12
12.	P	OF TOLKS AND		DELETE	1.1 TITLE		$T^{T}$	ADDITIONO/OFFARGES TO OF	TOERO A	Change	Addition
TITLE	•	111C A			1.2 NAME						_
NAME	AND BANK OF MAD DIVID COMPO 440										•
STREET ADDRESS	•		ADO 116			ADDRESS					
CITY-ST-ZIP	ST PETERSBU	RG FL 33/15		C BELETE	1.4 CITY-5	T-ZIP		ICE PRESIDENT		Change	Addition
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NAME					2.2 NAME		GG	73 BAHIA DELMAR BU	LIA CON	100 116	-
STREET ADDRESS	•				2.3 STREE	TADDRESS	64	13 BARIA DECIME D			Į
CITY-ST-ZIP				· 	2. 4 CITY-	ST-ZIP	ST	PETERSBUZG FL 3:	3712		
TITLE				DELETE	3.1 TITLE					☐ Change	Addition
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CITY-ST-ZIP					3.4. CITY-	ST-ZIP					
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STREET ADDRESS					4.3 STREE	T ADDRESS					ĺ
CITY-ST-ZIP					4.4 CITY-S	T-71P					
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NAME					5.2 NAME						Ì
					•	T ADDRESS					
STREET ADDRESS					5.4 CITY-5		1				ľ
CITY-ST-ZIP	<del></del>			☐ DELETE	6.1 TITLE		$\vdash$			Change	Addition
TITLE		•		DELLIC	6.2 NAME						
NAME	5 - 57-7 -				OZ IVAVE		1				

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.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

OF SIGNING OFFICER OR DIRECTOR

**=**: