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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P97000043127 (4)

ORCHID CITY REAL ESTATE, INC.

FILED
May 28 1998 8:00am
Secretary of State

Ononio di i neae estate, ino.							
Principal Plac	e of Business	Mailing Ad	Mailing Address				7
2657 PALM R	no .	2657 PAL	2657 PALM RD				
WEST PALM BEACH FL 33406 WEST PALM BEACH FL 33				33406	J <b>40</b> 6		DO NOT WRITE IN THIS SPACE
							3. Date Incorporated or Qualified
							05/15/1997
2 Principal P	lace of Business	2a. Mailing	Acidress				4. FEI Number Applied For
21	aco or coome o	26					65-075 7833 Not Applicable
Suite, Apt.	#, e1c.	Suite, Apt. #, etc.					\$8.75 Additional
22		t in	27				5. Certificate of Status Desired Fee Required
City & State	0	City &	State				6. Election Campaign Financing \$5.00 May Be
23		28]					Trust Fund Contribution
Ζip	<b>Zip</b> Country		Z <sub>I</sub> p Cou		ry		8. This corporation owes or has paid the current year Inlangible
24	25		29 30				Personal Property Tax due June 30. 🔲 Yes 🔲 No
	9. Name and Address of Currer	nt Registered A	gent				10. Name and Address of New Registered Agent
	D <b>REJO</b> N, EDUARDO J			8	י וי	Name	
2657 PALM RD				8:	2 :	Street Addre	ess (P.O. Box Number is Not Acceptable)
WE	EST PALM BEACH FL 33406						
				8:	3		
				84	4 (	City	85 Zip Code
						Ť	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, I torida Statutes, the above-named corporation submits this statement for the purpose of changing its regist 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 registe							
agent. Familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.							
SIGNATURE.							
	Signature, type fire profed name of registross and	and the second second	in (NOTE		gent	signature required	d when rainslaing) DATE
12.	OF ICERS AN	ID DIRECTORS	DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
	MOREJON, EDUARDO J		C) precit	1			
NAME OTDEST ADDRESS	2657 PALM RD			1.2 NAME		NODE CC	
STREET ADORESS	WEST PALM BEACH FL 3340	ne		1.3 STREE			
CITY-ST-ZIP TITLE	D		DELETE	1.4 CITY - 2.1 THE		ZIP	Change Addition
NAME	MOREJON, CAROL L		□ vectit	2 2 NAME		j	ondigo routon
STREET ADDRESS	2657 PALM RD			2.3 STREE		AUDITOC .	
í I	WEST PALM BEACH FL 3340	ne.				1	į
CATY-ST-ZIP TITLE	THE THE BENOTTE OF	· · · · · · · · · · · · · · · · · · ·	DELETE	2. 4 CHY 3.1 THE		- 211-	Change Addition
NAME			- PENEVE	3.2 NAME			
STREET ADDRESS				3.3 STREE		NUBE SS	
CITY-ST-ZIP				3.4. CITY			
TITLE	<del></del>		DELETE	4.1 TILE		···	Change Addition
NAME				4. 2 NAM		ł	
STREET ADDRESS			-	4.3 STREE		AUBEGG	
CITY-ST-ZIP				4.3 SINCE			
TITLE			DELETE	5.1 TITLE		<u> </u>	Change Addition
NAME				5.2 NAME			= ,
STREET ADDRESS				5.3 STREE		ODRESS	
CITY-ST-ZIP				5.4 CITY-			
TITLE			DELETE	6.1 TITLE		***	Change Addition
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREE		ODRESS	
CITY-ST-ZIP				6.4 CITY-			
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14. Thereby 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 logal offect 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 13 if changed, or on an attachment with an address.

CICNIATURE.

SALAMON T MOREN

Ul Jaa (Q1)9111-825