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

DOCUMENT # P97000044428

1. Corporation Name

ACCLAIM MANAGEMENT & REALTY, INC.

Principal Place of Business

Mailing Address

Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90065 034 ***150.00



4877 NW 67TH LAUDERHILL FL						DO NOT WRITE IN THIS SPACE				
						3. Date incorporated or Qualifed 05/16/1997				
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			Applied For	
21 1700	NW Leth 1	ace 26				65-0755337			Not Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 2 2 - 30 1 27						5. Certifcate of Status Desired			Additional Required	
City & State City & State City & State City & State 23 Ft. LAuderdale, FL 28					6. Election Campaign Financing S5.00 May Trust Fund Contribution Added to Fee					
24 33311 25 Broward 29 30					8. This corporation owes the current year Intangible Personal Property Tax. Yes No					
	9. Name and Address of	Current Registered Agent				10. Name and Address of New R	egistered	Agent		
***************************************	DOTOM MOTODIA		8	31 N	ame					
THURSTON, VICTORIA 4877 NW 67TH AVENUE LAUDERHILL FL 33319				32 S	treet Addre	set Address (P.O. Box Number is Not Acceptable)				
				33						
			8	34 C	ity		F-1	85 Zi	p Code	
							FĻ		***	
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							DATE			
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered 12. OFFICERS AND DIRECTORS 13.					nature required	ADDITIONS/CHANGES TO OF		ID DIREC	TORS IN 12	
12.	D	DELETE	1.1 TITLE			ABBITTONIS/OFFICES TO OF		. Chang		
	THURSTON, VICTORIA		1.2 NAMI			, , , , , , , , , , , , , , , , , , , ,	· · ·			
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CITY-ST-ZIP	LAUDERHILL FL 33319	•	1.4 CITY		,	,	بن	<u> </u>	'-	
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NAME			5.2 NAM 5.3 STR		DESS					
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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 changes, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS