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

- PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 22 1998 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 7

AAA A	ccess Realty, inc.				
Principal Plac	e of Business	Mailing Address			
, ·	Fairway Drive	7480 Fairway	Duties		
Suite		Suite 103	. Nu (Ac		
Miami Lakes, FL 33014		Miami Lakes, FL 33014		DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified	
11,701	caros, re 550 M	ritaini Lakos,	1 4 77414	96/20/97	
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 5901 1	NW 151 Street	26 7230 Glene	agle Drive	65-0763794	Not Applicable
Suite, Apt.	#, e1 0	Suite, Apt. #, etc.		5. Certificate of Status Desired X	\$8.75 Additional
22 Suite 107 City & State		27			Fee Required
23 Mlami Lakes, FL		City & State 28 Miami Lakes, PL		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Z(p)	Country	8. This corporation owes or has paid th	
24 33014	25	29 33014	30	Personal Property Tax due June 30.	Yes X No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registe	ered Agent
Damala	Danny		81 Name		
Pamela Perry 7230 Gleneagle Drive				dress (P.O. Box Number is Not Acceptable)	14 10 10 10 10 10 10 10 10 10 10 10 10 10
Miami Lakes, FL 33014			83		
,,,,			[63]		
			84 City		FI 85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607.1508, Florida State	ules, the above-named cor	rooration submits this statement for the purpo	ose of changing its registered
office or re	egistered agent, or both, in the State on familiar with, and accept the obligat	if Florida, Such change was	authorized by the corpora	ation's board of directors. I hereby accept the	appointment as registered
SIGNATURE		The second secon			
	Signature, typed or pointed name of registered again		TE Registered Agent signature requ		ATE
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE NAME	P/S/T/D	□] DETE IF	1.1 TITLE		☐ Change ☐ Addition
ramela refry			1.2 NAME		
CITY-ST-ZIP	7230 Gleneagle Driv Mlami Lakes, FL 330	e 14	1.3 STREET ADDRESS		
TITLE	IJIami Lakes, IL 200	DELFTE	21 TIFLE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP	i		2. 4 CITY - ST - ZIP		
TITLE		☐ DELFTE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP	 ,,		3.4 CITY-ST-ZIP		
TITLE		☐ DELETE	41 Title		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
City-ST-ZIP		DELETE	4.4 C(TY - ST - ZIP		Change Addition
TITLE		FT DETELE	5.1 TITLE		
NAME STREET ADDRESS			5.2 NAME	1000025350 -05/26/9801047	<u>]1</u> 1
CITY-ST-ZIP			5.3 STREFT ADDRESS 5.4 CHY-ST-ZIP	-U5/26/9801047	-025
TITLE		DELETE	61 TITLE	***158,75	Change Addition
NAME			62 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		7 2/02/
DITY PT JID			C 4 017K 01 710) ' Y)\\'

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 legal effect as if made under eath; 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