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

Mailing Address

STE. 228C

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SIGNATURE AND TYPED O

7100-39 FAIRWAY DR.

2a. Mailing Address

City & State

Suite, Apt. #, etc.

PALM BEACH GARDENS FL 33418

PROFIT CORPORATION ANNUAL REPORT

1999

Principal Place of Business

PALM BEACH GARDENS FL 33418

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

7100-39 FAIRWAY DR.

STE. 228C

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FLORIDA DEPARTMENT OF STATE *

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700056630

REEL PROPERTIES GROUP, CORPORATION

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24	25		29	3	0				Personal Property Tax.						Yes	3	□No	
	9. Name an	d Address of Current F	Register	red Agent		ļ <u>.</u>		10). Nai	me and /	Addre	ss of Ne	w Re	gistered	d Agent			
						81	Name											
KATES, JEFF A								82 Street Address (P.O. Box Number is Not Acceptable)										
30 THURSTON DR.																		
PALM	83		-		_													
										05	Zip C	odo.						
	84	City							FI	85	Zip C	,oue						
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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE																		
12.	Signature, typed or p	13.	- rigoin	. signaturo (400	ITIONIC (CHAN	GES TO	OFFI	CERS A	ND DIRE	сто	RS IN 12				
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				TY-ST		Pen	1	Beau	h	Gara	lans.	F/	. 334	18				
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NAME	_ 522212					AME									_	-		
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CITY-ST-ZIP					5.4 Cl	ITY-S1	- ZIP											
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CITY-ST-ZIP					6.4 CI	ITY-S1	-ZIP											
44 I havabu a	ertify that the ir	nformation supplied with	this filin	g does not qualify for	he eve	mnti	on stated	in Section	on 119	9.07(3)(i)	Flori	da Statu	tes. I t	further c	ertify tha	t the i	nformation	
indicated officer or o	on this annual r	report or supplemental a corporation or the receive hanged, or on an attachr	nnual re er or tru:	port is true and accurate empowered to ex-	ate and ecute th	l that his re	. my sign eport as i	ature sha required b	III nav	e the sar	ne leo	iai effect	asıtı	made un	oer oatn:	; ınaı	am an	

FILED May 15, 1999 8:00 am Secretary of State

05-15-1999 90023 039 ***150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualifed

NOT APPLICABLE

5. Certifcate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

06/26/1997 4. FEI Number

CR2E034 (11/98)

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Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable