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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000059610 (0)

ALR REALTY, INC.

FILED Jan 15 1998 8:00am Secretary of State

Principal Plac	ce of Business	Mailing Address							
8192 COLLEGE PARKWAY #11 8192 COLLEGE PARKWAY #1									
FORT MYERS	FL 33919	FORT MYERS FL 33919	FORT MYERS FL 33919			DO NOT WEIT	E INITUIO	CDACE	
						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified			
				ļ	07/07/199				
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	71		A	optied For
21		26			65 - 6	576801	9		ot Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.						Additional
22	SUITE !	27 SUITE	: (5. Certificate of	Status Desired	لسا	Fee R	equired
City & Stat	le	City & State			6. Election Can	npaign Financing		\$5.00	May Be
23		28			Trust Fund C				to Fees
Zip	Country	Zıp	Country			tion owes or has p			
24	25 9. Name and Address of Cu	29	30			perty Tax due Jun			No
		81	łame	TU, Maine and A	IDDIES OF NEW N	e Bresei e n	Maiir		
	ERO, ANGEL L								
	92 COLLEGE PARKWAY #11		82 8	treet Address	eet Address (P.O. Box Number is Not Acceptable)				
FU	RT MYERS FL 33919		83		SUITE				
			84	City			FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.	.0502 and 607.1508, Florida State	ules, the above-n	amed corpora	ation submits this	statement for the	nurnose o	changing il	ts registered
office or r	registered agent, or both, in the S im familiar with, and accept the ol	tate of Florida, Such change was bligations of Section 607,0505. F	s authorized by the Florida Statutes	e corporation	's board of direc	lors. I hereby acce	pt the app	ointment as	registered
SIGNATURE	and described the or	originions or, occitor, correcto, r	ionaa biaisioo.						
SIGNATURE	Signature, typed or printed name of registers	d agent and title if applicable (NC	D1E Registered Agent s	ignature required w	when reinstating)	 	DATE		
12.		AND DIRECTORS	13.		ADDITIONS/C	HANGES TO OFFI	CERS AND		
THILE	PVD	☐ DELET E	1.1 TITLE					Change	Addition
NAME	RIVERO, ANGEL L		1.2 NAME	,	SUITE	4			
STREET ADDRESS	8192 COLLEGE PARKWAY	′ #11	1.3 STREET ADD	ORESS	00.,4	•			
CITY - ST - ZIP	FORT MYERS FL 33919	DELETE	1.4 CITY-ST-ZI	P				[] Ob	T A days -
TITLE		☐ DETEIF	2.1 TITLE						☐ Addition
NAME			2.2 NAME						
STREET ADDRESS			2.3 STREET ADD						}
CITY-ST-ZiP TITLE		DELETE	2. 4 CITY - ST - Z 3.1 TITLE	IP				Change	Addition
NAME		L. J OLLEIL	3.2 NAME					☐ Onange	L Addition
STREET ADDRESS			3.3 STREET ADD	IBESS					
CITY-ST-ZIP			3.4. CITY-ST-Z	1					ļ
TITLE	l—	☐ DELETE	4.1 TITLE	"-	······································			☐ Change	Addition
NAME			4. 2 NAME					. — •	
STREET ADDRESS			4.3 STREET ADD	PRESS					
CITY-ST-ZIP			4.4 CITY - ST - ZI	P					
TITLE		☐ DELETE	5.1 TITLE					Change	☐ Addition
NAME			5.2 NAME						
STREET ADDRESS			5.3 STREET ADD	RESS					
CITY-ST-ZIP			5.4 CITY - ST - ZI	P					
TITLE		DELETE	6.1 TITLE					Change	Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADD	RESS					
CITY-SI-ZIP			6.4 CITY-ST-Z	P					

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 employed 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.

MONATURE MIRELA KINGS