**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000062728

R & S FLORIDA REAL ESTATE, INC.

	,				
Principal Place	of Business	Mailing Address			TI'N Eilin cinii (suin iluni linii toit tout
3000 SAND LAKE ROAD		3000 SAND LAKE ROAD LONGWOOD FL 32779			
LONGWOOD FL 32779				DO NOT WRITE IN THIS SPACE	
us		US		3. Date Incorporated or Qualifed	113 SI AGE
				07/18/1997	
2 Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
	E. Semoran Blvd.	26 P. O. Box 916	466	59-3458737	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State	e TI	City & State		6. Election Campaign Financing	\$5.00 May Be
Apopka	1, FL	Longwood, FL		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the current year	
32703	25 USA		USA	Personal Property Tax.	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Register	eu Agent
GASDICK, MICHAEL J			' G	eorge Hodges, EA	
	S. ORANGE AVE. STE. 1466		82 Street Add	fress (P.O. Box Number is Not Acceptable) 50 S. CR 427, Suite 116	
ORLANDO FL 32801			83	50 b. ok 427, barec 110	
0,12					
			84 City L	ongwood	32750 32750 32750 32750 32750
11. Pursuant	to the provisions of Sections 607.0502	2 and 607.1508, Florida Statutes	, the above-named cor	poration submits this statement for the purpose	of changing its registered
affina ar r	egistered agent, or both, in the State of familiar with, and accept the obligation	of Florida. Such change was auff	horized by the comoral	ion's board of directors. I hereby accept the ap	pointment as registered
	Ald as Long	Joly EA	George Hodg	es, EA 4/8/99	
SIGNATURE	Stanature, typed or printed name of registered agen		egistered Agent signature requir		
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS	
TITLE	D	☐ DELETE	1.1 TITLE		XXChange ☐ Addition
NAME	ESFAHANI, RAY		1.2 NAME		
STREET ADDRESS	3000 SAND LAKE ROAD		1,3 STREET ADDRESS	2733 E. Semoran Blvd.	
CITY-ST-ZIP	LONGWOOD FL 32751		1.4 CITY-ST-ZIP	Apopka, FL 32703	Change Addition
TITLE	D	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	SALEK, SAID		2.2 NAME		
STREET ADDRESS	13627 BAYLISS ROAD		2.3 STREET ADDRESS		
CITY-ST-ZIP	LOS ANGELES CA 90049		2. 4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		☐ DELETE	3.1 TITLE		
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP		☐ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
TITLE		□ Derese			
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE		_ Decere	5.2 NAME		
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-ZIP		
CITY-ST-ZIP	<u> </u>	□ DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE NAME		ott.:-	6.2 NAME		
INVIC	1		_		

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 armual 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 changed, or on an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

407-718-7779

FILED May 05, 1999 8:00 am Secretary of State

05-05-1999 90182 045 \*\*\*150.00