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 # P97000064881

CASA DEL SOL REALTY, INC.

Principal Plac	e of Business	Mailing Address					
7006 STAPOIN	3631 STONEHAVEN COURT	AVEN COURT					
SUITE A		ORLANDO FL 32817		DO NOT WRITE IN THIS SPACE			
WINTER PARK	FL 32792				3. Date Incorporated or Qualifed	3FACE	
US	•				07/24/1997		
	(D. Janes	2a. Mailing Address		-	4. FEI Number	Ι.Δ	pplied For
	Place of Business AS ABOVE	CAME AC ADOUR		99-3464199	— —	lot Applicable	
211		Suite, Apt. #, etc.		99-3404 199		Additional	
Suite, Apt.	#, etc.			5. Certifcate of Status Desired	+ - · · · -	Required	
22	City & State	State		E) ii O vala Sianaia			
					6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
23 WINT			WINTER PARK, FL32792 Zip Country				1.01.003
Zip				,	 This corporation owes the current year Int Personal Property Tax. 	angible ⊑xrYes	□No
24 327	9. Name and Address of Current		F' _		10. Name and Address of New Registered		
	9. Name and Address of Current	Registered Agent	81	Name	10. Hame and Address of their registered		
l vic	tor N. Alvarez		Ľ.				
3631 STONEHAVEN COURT			82	Street Ad	dress (P.O. Box Number is Not Acceptable)		
,	ANDO FL 32817		83				
	2400 16 02011		65				
			84	City	FI	85 Zip	Code
		4 507 4 500 FINAL OLD 4	Albaria la la		L	changing it	s registered
I office or	registered agent, or both, in the State o	f Florida. Such change was autho	onzed by	tne corpora	rporation submits this statement for the purpose of tion's board of directors. I hereby accept the appoint	ntment as r	egistered
agent. I a	am familiar with, and accept the obligati	ons of, Section 607.0505, Florida	Statutes	š			
SIGNATURE		Vii	to d	aling	verd when reinstatum) DATE		
<u> </u>	Signature, typed or printed name of registered agent OFFICERS AND	C	jistered Age	nt signature redu	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	ORS IN 12
12.	SD OFFICERS AND	DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AF	Change	
i	1	□ occere					_
NAME	ALVAREZ, RACHEL		1.2 NAME				
STREET ADDRESS				T ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32817	☐ DELETE	1.4 CITY-5	ST-ZIP		☐ Change	Addition
TITLE	_		2.1 TITLE				
NAME	ALVAREZ, VICTOR		2.2 NAME				
STREET ADDRESS			2.3 STREE	TADDRESS			
CITY-ST-ZIP	ORLANDO FL 32817		2. 4 CITY-	ST-ZIP		☐ Change	Addition
TITLE	TD	☐ DELETE	3.1 TITLE			Change	
NAME	ALVAREZ, MARGARITA		32 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32817	, <u></u>	3.4. CITY-	ST-ZIP		——————————————————————————————————————	
TITLE		☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME			4. 2 NAME				
STREET ADDRESS	3		4.3 STREE	T ADDRESS			
CITY-ST-ZIP			4.4 CITY-5	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	TADDRESS			
CITY-ST-ZIP			5.4 CITY-S	ST-ZIP			
		☐ DELETE	6.1 TITLE			Change	e ☐ Addition

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

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

May 10, 1999 8:00 am Secretary of State

05-10-1999 90297 018 ***150.00