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PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000077225 (5)

NATIONAL REALTY NETWORK, INC.

FILED May 01 1998 8:00am Secretary of State



Principal Place of Business Mailing Address **B16 EAST ATLANTIC AVENUE** 816 EAST ATLANTIC AVENUE DELRAY BEACH FL 33483 **DELRAY BEACH FL 33483** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>09/08/1997</u> 2a. Mailing Address 2. Principal Place of Business Applied For 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes 24 30 Personal Property Tax due June 30. 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **AMERILAWYER CHARTERED** 343 ALMERIA AVENUE 82 Street **CORAL GABLES FL 33134** 83 84 City Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpora ts this statement for the purpose of changing its registered both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered discount the obligations of, Section 607.0505, Florida Statutes. **SIGNATURE** (NOTE Registered Agent's gnature required when roinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE PSTD Change TITLE JEFFREY D. KADEL **\$ADOWSKI, MARK** 1.2 NAME NAME JEFFREY D. MANNER

8/6 EAST ATCAUTIC AVE
DECRAY BEAGY FL 33483

Change **816 EAST ATLANTIC AVENUE** 1.3 STREET ADDRESS STREET ADDRESS DELRAY BEACH FL 33483 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE TITLE NAME 22 NAME STREET ADDRESS 23 STREET ADDRESS CITY-ST-ZIP 2 4 CHTY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAM6 STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 165/ NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 C(TY-S1-ZIP CITY-ST-ZIP ☐ DFLETË Change Addition TITLE 6.1 TITLE 700002508047 -05/01/98--01075--025 NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS ***150.00 64 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 eath; that I am an officer or director of the corporation or the receiver or trusted 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 ultrachment with an address.

1.66/201-6500