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

P97000082036 (9) DOCUMENT #

IMMO REALTY ADVISORS, INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							Ansk Dalat inia		(ATO #11) 1003	
3080 N 35 S HOLLYWOOD			3080 N 35 STREET HOLLYWOOD FL 33021			DO NOT WRIT	TE IN THIS SF	PACE		
						3. Date Incorporated or Qualified 09/22/1997		,		
	lace of Business	2a. Mailing A	2a. Mailing Address			4. FEI Number	•	Ar	pplied For	
21		26	6			65-0789780		No	ot Applicable	
Sulte, Apt.	#, etc.	Suite, Apt 27	· • · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired			Additional equired	
City & State	e	28	<u> </u>			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip Country		Zφ			•	8. This corporation owes or has paid the current year Intangible			_ ~	
24	[25]	29	30	L,		Personal Property Tax due Jur			_) No	
	9. Name and Address of	Current Registered Agei	<u> </u>	81	Mana	10. Name and Address of New F	legistered A	gent		
	ELDSTONE, RONALD R			101	Name	,				
200 \$ BISCAYNE BLVD STE 2100 MIAMI FL 33131				82	Street Add	lress (P.O. Box Number is Not Accepta	able)			
				83		· · · · · · · · · · · · · · · · · · ·				
				84	City		FL	85 Zip (Code	
office or re	to the provisions of Sections 6 egistered agent, or both, in the maniliar with, and accept the	e State of Florida. Such cl	the corpora	poration submits this statement for the ition's board of directors. I hereby acc	purpose of o	hanging it intment as	is registered registered			
SIGNATURE										
12.	Signature, typed or printed name of region	RS AND DIRECTORS	(NOTE: Rec	stered Age	ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFF	DATE	DIDECTOR	OC IN 12	
TITLE	D		DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFF	ICENS AND I	Change	Addition	
NAME	BROWARNIK, MICHAE		OLCC / E	1.2 NAME				Gurange	C /Iddition	
STREET ADDRESS 3080 N 35 STREET			1.3 STREET	ADDRESS						
CITY-ST-ZIP	HOLLYWOOD FL 3302	1	I I	1.4 CITY- S	4					
TITLE	DELETE 21T				- 24		ſ	Change	Addition	
NAME	22						_			
STREET ADDRESS				2.3 STREET	ADDRESS					
CITY-ST-ZIP				2. 4 CITY-						
TITLE	<u>_</u>			31 TITLE	,, _,,			Change	Addition	
NAME				32 NAME						
STREET ADDRESS			1	3 3 STREET	ADDRESS					
CITY-ST-ZIP			1	3.4. CITY-1	ST-71P					
TITLE			DELE TE	4.1 TITLE				Change	Addition	
NAME			1	4. 2 NAME	ŀ					
STREET ADDRESS			1	4 3 STREET	ADDRESS					
CITY-ST-ZIP				44 CITY-S	T-ZIP					
TITLE			DELETE	5.1 TITLE				Change	Addition	
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRESS					
CITY-ST-ZIP				5.4 CITY - S	T-ZIP					
TITLE			DELETE	6.1 TITLE				Change	Addition	
NAME	•			6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRESS					
CITY-ST-ZIP				6.4 CfTY - S	T-ZIP					

Thereby 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 arrival 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 endress