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 # P97000082935 (2)

MR. REAL ESTATE & ASSOCIATES, INC.

STEPHEN F. VOIGT, P.A. 2414 BEE RIDGE ROAD

SARASOTA FL 34239

STREET ADDRESS

Principal Place of Business Mailing Address 7485 MARIANA DRIVE 7485 MARIANA DRIVE SARASOTA FL 34231 SARASOTA FL 34231 2a. Mailing Address 2. Principal Place of Business 21

Suite, Apt. #, etc. City & State City & State 7ip Country Zip Country

9. Name and Address of Current Registered Agent

29

3. Date Incorporated or Qualified Suite, Apt #, etc.

30

5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution

<u>09/23/1997</u>

8. This corporation owes or has paid the current year Intangible X Yes Personal Property Tax due June 30.

FILED

May 08 1998 8:00am

Secretary of State

DO NOT WRITE IN THIS SPACE

10. Name and Address of New Registered Agent

Street Address (P.O. Box Number is Not Acceptable) < Mariana 83

	> 26722	FL 39231
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above	e-named corporation submits this statemen	nt for the purpose of changing its registered
office or registered agent, or both, in the State of Florida. Such change was authorized by	by the corporation's board of directors. I her	eby accept the appointment as registered
 agent Lam familiar with, and accent the obligations of Section 607 0505. Florida Statute 	is.	

81

office or r agent. I s	egistered agent, or both, in the State of Flori im familiar with, and accept the obligations of	ida. Such change was a of, Section 607.0505, Flo	uthorized by the corpora rida Statutes.	ition's board of directors. I hereby accept the appointment as registered
SIGNATURE	Michael Falkenste	·		4-11-98
	Sonature, typed or printed name of registered agent and title		: Registered Agent signature requi	
12.	OFFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	Plesident _	☐ DELETE	1.1 TITLE	Change Addition
NAME (Uishael talkeristein		1.2 NAME	
STREET ADDRESS	licked talkenstein 1485 Mariana Da		1.3 STREET ADDRESS	
CITY-ST-ZIP	Satur sot, 12, 74231		1.4 CITY - ST - ZIP	
TITLE	Vice Phroidest	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Name of B. Fackenstein		2.2 NAME	
STREET ADDRESS	Manacy D. Fackenstein 7485 Manana Dr.		2.3 STREET ADDRESS	
CITY-ST-ZIP	Shad Esta FL 34231		2 4 CITY-ST-ZIP	
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME			: 3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4. CITY - ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-S1-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	

CITY-ST-ZIP 14. 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 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.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

Applied For

Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be Added to Fees

85 Zip Code