FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT # P97000103853 (2)

BLUE DOLPHIN REALTY, INC.

Principal Place of Business

FILED Jun 23 1998 8:00am Secretary of State



Mailing Address 17652 TAYLOR DRIVE 17652 TAYLOR DRIVE FORT MYERS FL 33908 FORT MYERS FL 33908 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 12/09/1997 Number Applied For 21 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intaggible Personal Property Tax due June 30. Yes Yes Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Gondos, Lisa 17652 TAYLOR DRIVE FORT MYERS FL 33908 83 gent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered with any acquirith obligations of Section 607.0505, Florida Statutes. 11. Pursuant to the p agent. I an (NOTE Registered Agent signature required when reinstaling) 12. ICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE DELETE 1.1 TITLE ☐ Change 1.2 NAME STREET ADDRESS 1.3 STREET ADDRESS CITY - ST - ZIP 1.4 CHY-ST-ZIP TITLE 21 TITLE Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change ___ Addition TITLE 3.1 TITLE 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 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change TITLE 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE 6.1 TITLE Change TITLE NAME 6.2 NAME -06/23/39--01107--**0\$1** 6.3 STREET ADDRESS STREET ADDRESS ***550.80 CITY-ST-ZIP 6.4 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 supplymental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a officer or director of the corporation of the receiver or trustee amounted 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 a faddress.