		PLEASE RE	AD ALL IN	STRUCT	<u>IONS</u>	BEFORE C	OMPLET	ING THIS F	ORM.		
FOR				Sandra Secret	A DEPARTMENT OF STATE Sandra B. Mortham Secretary of State			gherr # §	En		
DIVISION OF CORPORATIONS							FILED				
1. Corporation Name							98 NOV -5 PM 12: 19				
Houston Real Estate, Inc.								SECRETARY OF STATE TALLAHASSEE, FLORIDA			
								TALLAHAS	SEE. FLU	KIUA	
	lace of Busine .E. Gold Raton FI	len Harbort . 33432	Mailing / Drive	Same Same		-			_		
		incorrect in any way,				0011001001 001011.		TATEM	ENT	18	
					ing Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 12/18/97			
Suite, Apt. #, etc. Suite, Apt. #, City & State City & State								· · · · · · · · · · · · · · · · · · ·		Applied For	
Zip Country Zip					Соµпtry			65 0800668 Not Applicable 6. CERTIFICATE OF STATUS DESIRED for a Certificate of Status			
7. Names and Street Addresses of Each Officer and/or Director (FI					fit corpora	itions must list at lea	Total Continuate of Status				
Title(s) Name of Officers and/or Directors				3 (Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N			4	City / State / 2	Zip	
Pres/Dir Robert A Houston Dir					590 NE Golden Harbor Drive Boca Raton FL 334.					3432	
Secy Treas Dir	Lynn Houston				590 NE Golden Harbor D			Boca Rat	ton FL 3	3432	
Dir	Richard A. Houston				590 NE Golden Harbor			Drive Boca Raton FL 33432			
							4000026822144				
			,			-		****75	30 3299 3.00 **	**750_00	
	8. Nam	e and Address of C	urrent Registered	Agent			9. Name and A	ddress of New Re	gistered Agent		
		SERVICE CO	(CSC)			Name Maureen	Healey I	Kennon, P.A	١.	(1,88)	
1201 Hays Street Tallahassee, FL 32301					· ·			Healey Kennon, P.A. O. Box Number is Not Acceptable) ades_Road # 313			
					Suite, Apt. #, Etc.			Guite 313			
						City Boca Rato			State Zip	Code 33431	
10. I, being Signature of		registered agent of	he above named c	orporation, am f	amiliar wit	h and accept the ob	ligations of Section			·	
Registered A	Agent	eu Kennon	REGISTERED	AGENT MUST	SIGN			Date11	./4/98		
11. Thi Inta	is corpo angible	ration owes o Personal Pro	or has paid	the curre ue June 3	nt yea 30.	r Yes 🔲	No 🗷	(See	other side for I on intangible		
this reins owed by	statement app the corporati	fficer or director or th lication, the reason fo on have been paid ar ue and accurate, and	or dissolution has b nd the names of Ind	een eliminated, lividuals listed o	the corpor n this form	ate name satisfies to do not qualify for a	he requirements in exemption und	of section 607,0401	or 617.0401, F.	S., that all fees	
SIGNATURE: SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #											
Prisident Prisident											