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Secretary of State

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P98000010725

1. Corporation Name

SUPREME REALTY & INVESTMENTS, INC.

Principal Place of Business

687 E. 37TH STREET
HIALEAH FL 33013

Mailing Address

687 E. 37TH STREET
HIALEAH FL 33013

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/03/1998

2. Principal Place of Business

21 1790 W. 49 ST., #207
Suite, Apt. #, etc.

22 Suite #207

City & State

23 Hialeah, FL 33012

Zip

24 33012

Country

25 USA

2a. Mailing Address

26 1070 W. 51 PL
Suite, Apt. #, etc.

27 City & State

28 Hialeah, FL 33012

Zip

29 33012

Country

30 USA

4. FEI Number

65-0810386

Applied For

Not Applicable

5. Certificate of Status Desired ☐

-\$8.75 Additional

Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation owes the current year intangible
Personal Property Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CERRA, BARBARA M
687 E. 37TH STREET
HIALEAH FL 33013

10. Name and Address of New Registered Agent

81 Name

Cerra, Barbara M.

82 Street Address (P.O. Box Number is Not Acceptable)

1070 W. 51 PL

83

84 City

Hialeah

FL

85 Zip Code

33012

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETENAME
CERRA, BARBARA M
STREET ADDRESS
687 E. 37TH STREET
CITY-ST-ZIP
HIALEAH FL 33013TITLE ☐ DELETENAME
MARTINEZ, WILLIAM
STREET ADDRESS
667 102ND AVENUE
CITY-ST-ZIP
NAPLES FL 34108TITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETENAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1070 W. 51 PL

1.4 CITY-ST-ZIP

Hialeah, FL 33012

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

125 PAGO PAGO DR., EAST

2.4 CITY-ST-ZIP

Isle of Capri, FL 34113

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CERRA

Date

Daytime Phone #

4/1/99

305-825-3221

CR2E034 (11/98)