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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000039325

1. Corporation Name

BYRNE ESTATE SALES, INC.

Apr 01, 1999 8:00 am Secretary of State

04-01-1999 90049 032 ***150.00



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Principal Place	of Business	Mailing Address			_		JB 13114 38688 6911	18 11861 BILL 1881	
307 ELLIOTT ROAD SOME SEACH FL 32548 TT. WALTON BEACH FL 32548 TT. WALTON BEACH FL 3254				8		DO NOT WRITE IN TH	S SPACE		
						3. Date Incorporated or Qualifed			
ļ		و چها دیاند <u>د. د</u> مین بیران سیاستها	_			04/30/.1998	: بنية . سي		
Principal Place of Business 2a. Mailing Address						4. FEI Number		pplied For	
21		26				59-3513530		lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27						5. Certifcate of Status Desired		Additional Required	
City & State						6. Election Campaign Financing	\$5.00	May Be	
23	28					Trust Fund Contribution		I to Fees	
Zip	Country	Zip Coun				8. This corporation owes the current year Intangible			
24	25 29 30				_	Personal Property Tax.	Yes	□No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registere	Agent		
PARTIE CLIPANETIA				81 Name			ļ		
BYRNE, ELIZABETH 307 ELLIOTT ROAD				82	2 Street Address (P.O. Box Number is Not Acceptable)				
FT. WALTON BEACH FL 32548				83			_		
			ļ	84	City		. 85 Zip	Code	
					·	F	L `	-	
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 Noted or printed pame of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	Signature, typed or printed name of registered agent		Registered 13.	Agent s	signature required v	when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS /	ND DIRECT	ORS IN 12	
12.	OFFICERS AND	DELETE	1.1 TIT	16		7.DDITIONO/OTO TO OTT TO DETAIL	Change		
TITLE	BYRNE, ELIZABETH		1.2 NA					_	
NAME	307 ELLIOTT ROAD				ODRESS			\ '	
STREET ADDRESS	FT. WALTON BEACH FL 32548			TY-ST-				-	
TITLE			2.1 111		<u> </u>		Change	Addition	
NAME			ME .			سرمه، د			
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CITY-ST-ZIP				TY-ST-					
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NAME	•		3.2 NA	ME		•			
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NAME			4. 2 N	AME					
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CITY-ST-ZIP			4.4 CF	TY-ST-	ZIP				
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NAME			5.2 NA	ME		•		ļ	
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TITLE		DELETE	6.1 ∏	ΠE			☐ Change	e 🗀 Addition	
NAME			6.2 NA	WE				1	
STREET ADDRESS			6.3 ST	REET A	ADDRESS			}	
CITY-ST-ZIP			6.4 CF	TY-ST-	ZIP			ĺ	

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.

CITY-ST-ZIP

BEOUERDABETH I. BYRNE 3-29-99