

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

FILED  
Apr 13, 1999 8:00 am  
Secretary of State

04-13-1999 90089 047 \*\*\*150.00

DOCUMENT # P98000049117

1. Corporation Name

PROPERTY INNOVATIONS, INC.

Principal Place of Business  
THERREL BAISDEN, P.A.  
ONE S.E. 3RD AVENUE #2400  
MIAMI FL 33131

Mailing Address  
THERREL BAISDEN, P.A.  
ONE S.E. 3RD AVENUE #2400  
MIAMI FL 33131

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/26/1998

4. FEI Number

65-0842002

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 Fees

8. This corporation owes the current year Intangible  
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Hunt, Cook, et al -

Suite, Apt. #, etc.

22 401

City & State

23 Boca Raton, FL 33431

Zip Country

24 33431 25 U.S.A.

2a. Mailing Address

26 Hunt, Cook, et al

Suite, Apt. #, etc.

27 401

City & State

28 Boca Raton, FL 33431

Zip Country

29 33431 30 U.S.A.

9. Name and Address of Current Registered Agent

ELLIS, SETH E ESQ  
THERREL BAISDEN, P.A.  
ONE S.E. 3RD AVENUE #2400  
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

Hunt, Cook, et al

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

2200 Corporate Blvd., N.W.

83

Suite 401

84

City Boca Raton

FL

85 Zip Code

33431

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

SETH E. ELLIS

1/13/99

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

(NOTE: Registered Agent signature required when remitting)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME LEBLANC, RICHARD  
STREET ADDRESS C/O 5914 SOUTH FARRAGUT DRIVE  
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE D ☐ DELETE

NAME LEBLANC, KENNETH  
STREET ADDRESS C/O 5914 SOUTH FARRAGUT DRIVE  
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE D ☐ DELETE

NAME LEBLANC, ELERY  
STREET ADDRESS C/O 5914 SOUTH FARRAGUT DRIVE  
CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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:

RICHARD LEBLANC

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/99

Date

407-345-9879

Daytime Phone #

CR2E034 (11/98)

0187215