

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

99 MAR -1 PM 2:38

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # 098000055940 1. Corporation Name CASSEL REALTY, INC

Principal Place of Business Mailing Address 1801 PONCE DE LEON BLVD. CORAL GABLES, FL 33134.

2. Principal Place of Business 2a. Mailing Address 21 1801 PONCE DE LEON BLVD 26 P.O. BOX 14-1065 Suite, Apt #, etc Suite, Apt #, etc 22 City & State 27 City & State 23 CORAL GABLES, FL. 28 CORAL GABLES, FL Zip 29 33134 Country USA 30 33134 Country USA

9. Name and Address of Current Registered Agent CASSANDRA E. RODRIGUEZ NELEN COSTA COSTA AND ASSOCIATES, PA 7330 W-20th AVE MIAMI, FL 33016

81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City

DO NOT WRITE IN THIS SPACE 3 Date Incorporated or Qualified June 23, 1998 4 FEI Number 65-0844910 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 10 Name and Address of New Registered Agent

Signature of New Registered Agent: Pamela FL 85 Zip Code

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 block 12, 13b

(NOTE: Registered Agent's signature is not required)

DATE

Table with 12 rows for Officers and Directors. Includes columns for Title, Name, Street Address, City, State, Zip. Row 1: PRESIDENT, CASSANDRA E. RODRIGUEZ, 5020 OROVIA DRIVE, CORAL GABLES, FL, 33146.

Table with 13 rows for Additions/Changes to Officers and Directors in 12. Includes columns for Title, Name, Street Address, City, State, Zip. Row 1: P.O. BOX 14-1065, CORAL GABLES, FL, 33134.

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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: Cassandra E. Rodriguez President (305) 2/25/99 443-1106

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