PROFIT CORPORATION ANNUAL REPORT



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State

## FILED May 07, 1999 8:00 am Secretary of State 05-07-1999 90135 038 \*\*\*150.00

	1999		RPORATIONS	_			
1, Corporation	MENT # P98000 ST & FREE REALTY, INC.	056182		e munisəri mə (diği xəm dənii əbili əbili əbili əbili	) <b>0.449 0</b> 010 10 <b>100 1</b> 5	iko ahon koor	
Principal Place	of Business	Mailing Address		ייסע ומצם יאפס ווופס גנוסו וצובו בגן ומאונקען ך		ישטו ונוו טוו	
10935 LA SALIN		10905 LA SALINAS CIRLCE					
BOCA RATON F		BOCA RATON FL 33428		DO NOT WRITE IN THIS SPACE			
				3. Date Incorporated or Qualifed			
				06/22/1998			
2. Principal Pl	ace of Business	2a. Mailing Address		4 FEI Number	<u> </u>	led For	
21		28		65-0849512		Applicable	
Suite, Apt. 7	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Ad Fee Requ		
22		City & State		6. Election Campaign Financing	\$5.00.M		
City & State	'	28	<del>_</del>	Trust Fund Contribution	Added to		
Zip	Country	Zip	Country	8. This corporation owes the current year in	ntangible	<b>.</b>	
24	25	29 3	0	Personal Property Tex.		□No	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered	Agent	$\neg \neg$	
10 101	NER, OTHEL		1 1				
	W. SUNRISE BLVD.		82 Street Addi	ress (P.O. Box Number is Not Acceptable)			
	TATION FL 33313		83				
	•				85 Zip Co	via	
			84 City	<u>F</u> i		ŀ	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-named com	poration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the submits the submi	of changing its re pintment as regis	egistered stered	
office or n	egistered agent, or both, in the State on familiar with, and accept the obligation	ons of, Section 607.0505, Florid	la Statutes.	on a boding of directors. Thereby beauty and appropriate	···		
CICNATURE				ad upon receipting) DATE		<u>_</u> ا _	
<u></u>	Signature, typed or printed name of registered agent OFFICERS AND		legistered Agent signature require 13.	ADDITIONS/CHANGES TO OFFICERS	NO DIRECTOR	5 11 42 8	
12.	PSTD				UND DIRECTOR	5 IN 12 S	
NAME	KOPP, KENNETH B	☐ DELETE	1.1 TITLE		Change	Addition 5	
1 1		□ DETELE	1.1 TITLE 1.2 NAME			Addition 5	
STREET ADDRESS	10935 LA SALINAS CIRLCE	□ perete	E I			Addition F	
CITY-ST-ZIP			12 NAME		Change	Addition 7	
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14. I hereby cartify that the information supplied with this filling does not at indicated on this annual report or supplemental annual metal. See a officer or director of the corporation or the receiver or fullyside annual metal. Block 12 or Block 13 if changed, or on an attachment with paradictors. ualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the informall persecurate and that my signature shall have the same legal effect as if made under eath; that I am an upod to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in with all other like empowered.

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SIGNING OFFICER ON DIRECTOR SKINATURE AND TYPE