

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 # P98000072597

1. Corporation Name

NATIONWIDE INVESTMENTS
REAL ESTATE SERVICE INC.

Principal Place of Business

Mailing Address

2059 TRADE CENTER WAY
NAPLES FL 34109

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 9. Name and Address of Current Registered Agent

CAL MONTENEGRO
280 HENLEY DR
NAPLES FL 34109

81 Name

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

83

84 City

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 board of directors

10. Name and Address of New Registered Agent

DATE

12. OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D CAL MONTENEGRO [DELETE]

NAME

STREET ADDRESS 280 HENLEY DR

CITY-STATE-ZIP NAPLES FL 34109

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

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STREET ADDRESS

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TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE [DELETE]

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-STATE-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-STATE-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-STATE-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-STATE-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-STATE-ZIP

899105905156-2

-04/12/99-90038-007

*****150.00 *****150.00

899105905156-2

-04/29/99-01039-001

*****8.75 *****8.75

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-99. 941-593 0527

CR2E034 (1/198)