FILE NOW: FILING FEE AND LATE FEE TO $550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000074112

National REAL ESTATE INSTITUTE, INC.

99 MAY 14 AM 8:24

[redacted] STATE

Principal Place of Business
411 EAST JACKSON ST. STE. 101
ORLANDO FL 32801

Mailing Address
411 EAST JACKSON ST. STE 101
ORLANDO FL 32801

DO NOT WRITE IN THIS SPACE

21	Principal Place of Business: Suite, Apt. #, etc.	
22		
23	City & State	Orlando FL
24	Zip	32801
25	Country	ORANGE
26	Mailing Address: Suite, Apt. #, etc.	108 S. Court
27		
28	City & State	Orlando FL
29	Zip	32801
30	Country	ORANGE

3 Date Incorporated or Qualified: 10 98

4 FEI Number: 59 3537598 [ ] 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 [X] No

Name and Address of Current Registered Agent

SALZMAN, MARY
411 EAST JACKSON ST. STE. 101
ORLANDO FL 32801

Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 108 SOUTH COURT AVE

83

84 City: Orlando FL 85 Zip Code: 32801

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

OFFICERS AND DIRECTORS

9 TITLE	D	[ ] DELETE
NAME	SALZMAN, MARY	
STREET ADDRESS	411 EAST JACKSON ST. STE. 101	
CITY-ST-ZIP	ORLANDO FL 32801	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

ADDITION / CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE		[X] Change [ ] Addition
12 NAME		
13 STREET ADDRESS	108 SOUTH COURT AVE	
14 CITY-ST-ZIP	Orlando FL 32801	
21 TITLE		[ ] Change [ ] Addition
22 NAME		
23 STREET ADDRESS		
24 CITY-ST-ZIP		
31 TITLE		[ ] Change [ ] Addition
32 NAME		
33 STREET ADDRESS		
34 CITY-ST-ZIP		
41 TITLE		[ ] Change [ ] Addition
42 NAME		
43 STREET ADDRESS		
44 CITY-ST-ZIP		
51 TITLE		[ ] Change [ ] Addition
52 NAME		
53 STREET ADDRESS		
54 CITY-ST-ZIP		
61 TITLE		[ ] Change [ ] Addition
62 NAME		
63 STREET ADDRESS		
64 CITY-ST-ZIP		

[redacted]
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****158.75 ****158.75

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: Mary Salzman MARY SALZMAN 4/20/99 407 896 6500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

President