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Mailing Address

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000089025

1. Corporation Name

Dringing Diago of Business

REALTY ACQUISITION GROUP, INC.

Findipal Flace	or Dusiness	Majing / ladi acc								
1800 ATLANTIC BLVDSTE.309-A KEY WEST FL 33040		1800 ATLANTIC BLVD.:STE.309-A KEY WEST FI. 33040				DO NOT WRITE IN THIS	SPAC	E		
						3. Date Incorporated or Qualifed				
						10/15/1998	_			
2. Principal Pl	ace of Business	2a. Mailing Address	Mailing Address			4. FEI Number	L	Applied For		
21		26							Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired			dditional	
22		27						ee Red		
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be				
23	Country	Z ip	Country			Trust Fund Contribution Added to Fees				
Zip				8. This corporation owes the current year Personal Property Tax.			Intangible ☑No			
24	9. Name and Address of Curre		30			10. Name and Address of New Registered				
	5. Haine and Address of Corre	int Kogistered Agent	1	81	Name	The traine and places of the second				
WYCKOFF, DOUGLAS S ESQ.			l	_						
258	SO. DESOTO AVE.,STE.1		82 Street			ress (P.O. Box Number is Not Acceptable)				
ARC	ADIA FL 34266		ŀ	83						
			ļ		-		-1251	71 - C		
				84	City	FL	85	Zip C	ode	
office or r	to the provisions of Sections 607.05 egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida. Such change was at	uthorized	bv t	the corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appo	chang intment	ing its i as reg	registered istered	
-	To to time that, and accept the cong									
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable. (NOTE:	Registered .	Agent	t signature require	ed when reinstating) DATE				
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AF				
TITLE	D DELETE			1.1 TITLE			다	ange	☐ Addition	
NAME	GANEM, RAY		1.2 NA	_						
STREET ADDRESS	•				ADDRESS				1	
CITY-ST-ZIP	KEY WEST FL 33040		1.4 CITY-ST-Z		Γ- ZIP		□ Ch	Nanna Nanna	☐ Addition	
TITLE				2.1 TITLE				ange		
NAME	GANEM, GEORGE J		2.2 NA							
STREET ADDRESS	1800 ATLANTIC BLVD.,STE.30	9-A			ADDRESS					
CITY-ST-ZIP				2.4 CITY-ST-ZIP 3.1 TITLE			Cr	nange	Addition	
TITLE			1	3.2 NAME				ungo		
NAME					ADDDCCC					
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				3.4. CITY-ST-ZIP 4.1 TITLE				ange	Addition	
		(DELETE	4. 2 NA					•	_	
NAME					ADDRESS					
STREET ADDRESS			4.4 CIT							
CITY-ST-ZIP TITLE		□ DELETE	4.4 CH		- ZIF		□ Ct	ange	☐ Addition	
NAME		<u> </u>	5.2 NA				_	_	_	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			54 CIT	Y-ST	r-ZIP					
TITLE		☐ DELETE	6.1 TIT	LE			Ch	nange	☐ Addition	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fforida 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

6.2 NAME

6.4 CITY-ST-ZIP

SIGNATURE

NAME STREET ADDRESS

CITY-ST-ZIP