SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999. AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Aug 27, 1999 8:00 am Secretary of State

08-27-1999 90003 035 ***150.00

1999	GO WE THE	DIVISION OF CORF ORGANONS	
DOCUMENT # 1. Corporation Name	P98000100	0806	
FEDERAL HOME REA	ALTY NETWORK, INC	•	 _

Principal Place	e of Business	Mailing Address				
2250 N FEDER BOCA RATON	· ·	2250 N FEDERAL HWY. BOCA RATON FL 33431				
					DO NOT WRITE IN THIS SPACE	
					3. Date Incorporated or Qualified	
					12/03/1998 4. FEI Number Applied For	
<u> </u>	lace of Business	2a. Mailing Address			Not Applicat	
Suite, Apt. :	# etc	Suite, Apt. #, etc.			SR 75 Additional	-
22	<i>π</i> , 516.	27			5. Certificate of Status Desired Fee Required	
City & State	9	City & State		***	6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Count	try	8. This corporation owes the current year	
24	25	29	30		Intangible Personal Property. Yes X No	
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent	
CEN	CEN PRADECIDO D		۱	Name		
	SEN, BRADFORD R O N FEDERAL HWY.		8	32 Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	CA RATON FL 33431		E	33	11. At 12. At 12	—
			L			
			8	34 City	FL 85 Zip Code	
			toc the abov		poration submits this statement for the purpose of changing its registered	
11. Pursuant	to the provisions of sections 607.050	02 and 607.1508. Florida Statui	LCS, IIIC ADDI	ve-nameu com		
office or i	registered agent, or both, in the Stat	e of Florida. Such change was	authorized	by the corpora	ation's board of directors. I hereby accept the appointment as registered	
office or a gent. I a	to the provisions of sections 607.050 registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida. Such change was	authorized	by the corpora	ation's board of directors. I hereby accept the appointment as registered	
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6.4 CITY-ST-ZIP 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.

SIGNATURE \$\infty

CR2E034 (5/99)