2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #

P99000015471

1. Entity Name



FILED Jan 29, 2003 8:00 am Secretary of State 01-29-2003 90300 032 ***150.00

KARNEY	REALTY, INC.									
Principal Place of Business 3101 N.E. 47TH COURT. #501 FORT LAUDERDALE FL 33308 Mailing Address 3101 N.E. 47TH COURT. #501 FORT LAUDERDALE FL 33308										
	lace of Business		iling Address			\dashv				
936 INTRACOASTAL DR 936 INTAACOASTA Suite, Apt. #, etc. Suite, Apt. #, etc.					LDR	_	/			
#2105 #2105							CHECK HERE IF MAKI	NG CHANGE	S	
City & State / City & State					~	4	65-0001/17		Applied For	
アルムガレ Zip	DERDALE, FL.	Zip	HAVUE K	Coun	try			\$8.75 A	Not Applicable	
37330		」 ヺ	3304	Coun	y	5.	. Certificate of Status Desired	Fee Requi		
	6. Name and Address of Curre	nt Registere	ed Agent		Name	7.	Name and Address of New Registere	d Agent		
KARNEV	I ICCETT I				Name					
KARNEY, LIGGETT L 3101 NE 47 CT					Street Address (P.O. Box Number is Not Acceptable)					
#501	77 01					•	· b			
FORT LAUDERDALE FL 33308					City		F	Zip Co	ode	
8. The above	named entity submits this statement	for the purp	oose of changing it	ts registere	Led office or regis	tered a	agent, or both, in the State of Florida. I a		h, and accept	
the obligat	ions of registered agent.	1/						į	,	
SIGNATURE .	Signature, //ped or printed name of registered age	Sar	nly	NT: Donistava	d Agent signature requ		n reinstating} DATI	1/27	/03	
		urana ma nabt	IIICADIO, (NC	71C. Registeret	a Agent signature requ	ILECT AND ISA	melissaing) DAT		/	
After	ILE NOW!!! FEE IS \$150.00 r May 1, 2003 Fee will be \$550.0 c Payable to Florida Department				-		Election Campaign Financing Trust Fund Contribution.		.00 May Be ed to Fees	
10.	OFFICERS AN	D DIRECTO	DRS	11.		A		ND DIRECTO	RS IN 11	
TITLE	D		☐ Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	KARNEY, LIGGETT L 3 101 N.E. 47TH COURT, #5 01			NAME STRE	E Et adoress	1				
CITY-ST-ZIP	FORT LAUDERDALE FL 33308				-ST-ZIP				1	
TITLE			☐ Delete	TITLE				☐ Change	☐ Addition	
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CITY-ST-ZIP					-ST-ZIP					
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CITY-ST-ZIP		-,-		_	-ST-ZIP					
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TITLE			☐ Defete	TITLE				Change	☐ Addition	
NAME expect address				NAME						
STREET ADDRESS CITY-ST-ZIP					ET ADDRESS ST-ZIP			•		
12. I hereby c indicated of the corp	on this report or supplemental report	is true and a powered to	accurate and that execute this repor	or the exer my signati t as require	mption stated in a ure shall have th	e same	n 119.07(3)(i), Florida Statutes. I further of e legal effect as if made under oath; that orida Statutes; and that my name appear	Lam an office	er or director	

SIGNATURE: