

**2000 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**May 21, 2001 8:00 am**  
**Secretary of State**

05-21-2001 90030 007 \*\*\*150.00

DOCUMENT # P99000040896

1. Entity Name  
**H & R REALTY ACQUISITIONS, INC.**

Principal Place of Business  
**600 NE 14<sup>TH</sup> AVE  
 # 525N  
 HALLANDALE, FL 33009**

Mailing Address  
**600 NE 14<sup>TH</sup> AVE  
 # 525N  
 HALLANDALE, FL 33009**

**658344**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number  
**65-0916831**

Applied For  
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

DO NOT WRITE IN THIS SPACE


6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**HARRY PAPPAS  
 600 NE 14<sup>TH</sup> AVE  
 # 525N  
 HALLANDALE, FL 33009**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE  **HARRY PAPPAS**

**4/30/01**  
 DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  (See criteria on back)

**FILE NOW!!! FEE IS \$150.00  
 After MAY 1, 2000 Fee will be \$550.00  
 Make Check Payable to Department of State**

10. Election Campaign Financing Trust Fund Contribution.  **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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TITLE	NAME	TITLE	NAME
	<b>P/S/D HARRY PAPPAS 600 NE 14<sup>TH</sup> AVE # 525N HALLANDALE, FL 33009</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	<b>S</b>
	<input checked="" type="checkbox"/> Delete		
	<b>V/P/S/D RALPH DELLIGETTI 636 E HALLANDALE BCH. BLVD HALLANDALE, FL 33009</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<input checked="" type="checkbox"/> Delete		
	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **HARRY PAPPAS PRES**

**4/30/01** **954 478-7475**  
 Date Daytime Phone #