## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

S03985

(6)

ARISTA REALTY & INVESTMENT CORPORATION

## FILED Apr 28 1998 8:00am Secretary of State



But L.D. April Address						
Principal Place of Business Mailing Address						
	EDERAL HIGHWAY	2275 SOUTH FEDERAL HIGHWAY SUITE 350				
SUITE 350 DELRAY BEAC	H FL 33483	DELRAY BEACH FL 33483				DO NOT WRITE IN THIS SPACE
US	.,,,,	US				3. Date Incorporated or Qualified
						10/04/1990
	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For
21		26				65-0229446 Not Applicable
Suite, Apt. (	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired See Required Fee Required
22 City & Stole		City & State			<del></del>	
City & State		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip			Cou	ntry	,	8. This corporation owes or has paid the current year Intangible
24	25	29	30	•		Personal Property Tax due June 30. Yes No
27	Name and Address of Currer		[20]			10. Name and Address of New Registered Agent
1110	NOO ARISTEA			81	Name	
LUCIDO, ARISTEA 4230 CEDAR CREEK RD				82	Street A	ddress (P.O. Box Number is Not Acceptable)
	CA RATON FL 33487			62 Sireel A		DOLEGO (F.O. DOX NUMBER TO NOT ACCEPTANCE)
50.	DA INION LE 00107			83		
				84	City	B5 Zip Code
					1	corporation submits this statement for the purpose of changing its registered pration'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  Signature Specification of registered agent and bille if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE  12. OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
12. TITLE	DI TICERS AIN	DELETE	1.1 10	ΠĒ		Change Addition
NAME	LUCIDO, ARISTEA	passed at a little of	1.2 NA			
STREET ADDRESS	4230 CEDAR CREEK RD				ADDRESS	lipho SW base
CITY-ST-ZIP	BOCA RATON FL				ST-ZIP	1660 SW. 6 Ave BOLA RATON, FT 33486
TITLE	VP DELETE			21 HILE		Change Addition
NAME	COSTA, SANDRA		22 N/	AME	ŀ	
STREET ADDRESS	17724 CROOKED OAK AVEN	IUE	2.3 ST	TREET	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		2.4 C	JTY-S	ST-ZIP	
TITLE		DELETE	3.1 TI	TLE		Change  Addition
NAME			3.2 N/	AME	1	
STREET ADDRESS			3.3 ST	TREET	ADDRESS	
CMY-ST-ZIP				3.4. CITY - ST - ZIP		0
TITLE		[_] DELETE	4.1 TI		-	☐ Change ☐ Addition
NAME			4. 2 N		1	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP		- I brieve			S1-ZIP	Change Addition
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NAME			5.2 N/		r 1000ccc	
STREET ADDRESS			1		T ADDRESS	
CITY-ST-ZIP		☐ DELETE			ST-ZIP	Change Addition
TITLE		[ ] Dettit	6.1 T/			Li Change Li Ruchitet
NAME OTREET ADDRESS	•		6.2 N/		T ADDRESS	}
STREET ADDRESS	•					
CITY-ST-ZIP			6.4 U	117-5	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.

VIII GN