FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # S34055

(1)

1. Corporation Name ANDIUM REAL ESTATE MANAGEMENT CORP. Principal Place of Business 1900 N. FEDERAL HIGHWAY BOYNTON BEACH FL 33435 BOYNTON BEACH FL 33435											
US			US	US				3. Date Incorporated or Qualified 02/26/1991 05/01/1995			
								02/26/1991 4. FE! Number			oplied For
 Principal Pia 21 	ce of Business		F1	2a. Mailing Address				59-3053646 Not Applicable			
Suite, Apt. #	, etc.		Suite	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional		
City & State				City & State				6. Election Campaign Financing \$5.00 May Be			
23			28					rust Fund Continuation — Added to Fees			
Zip	·, ·			├ ``				8. This corporation has liability for intangible tax under s 199.032, Florida Statutes ★ Yes No			
24	o Name at	nd Address of Cui	29 rent Registered	l Agent	30			10. Name and Address of New I			
	g, Hame ut	107,000			81	1	Name				
WATKINS	S, RAYMONI)				2	Street Add	dress (P.O. Box Number is Not Acceptable)			
1900 N. FEDERAL HIGHWAY BOYNTON BEACH FL 33435								30/03 ()			
						3					
					84	4	City		F	85 Zip	Code
11 Pursuant to	o the provision	s of Sections 607.0	502 and 607.150	08. Florida Statu	utes, the above	<u> </u> - Da	amed corpo	ration submits this statement for the pure of directors. I hereby accept the app	rpose of	changing its re	egistered office
SIGNATURE	•	the obligations of, \$ articlinane of registered OFFICERS		ie (NOTE Registered Ag)-s-(Signatura reguira	ed which reinstating ADDITIONS/CHANGES TO OF	DATI	AND DIRECTO	
T-TLE	D			DEFEIF	1. 1 TiTu	ŧ		•		Change	Addition
NAME		, RAYMOND			1.2 NAMI						
STREET ADDRESS	DOVINTON BEACH EL 2040					1.3 STREET ADORESS					
CITY-SI-ZIP	ROTNIO	N BEAUM FL 334	35	DELETE -	2 1 Tift		ZIF			☐ Change	Add-tion
TITLE NAME					2.2 NAM					_	_
STREET ADDRESS							ADDRESS				
C-1Y ST-ZIP					2 4 CITY						
TI'LF				DELETE	3 1 1111	E				Change	Addition
NAME					3.2 NAM						
STREET ADDRESS							ADDRESS				
CITY - S1 - ZIP				DELETE	3.4 CITY 4. 1 TITU	_	T-3P			Change	Addition
TILE					4.2 NAM						_
NAMÉ STREET AUDRESS							ADDRESS				
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NAME					5.2 NAM	1E					
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TIFLE				DEFE LE	6 1 111					☐ Change	☐ Youtton
NAME erocci anopeco					6.2 NAV		ADDRESS				

6.4 CITY-ST-ZIP 14. Ido hereby certify that the information supplied with this fing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DAY