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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S45609

(2)

GENERAL REALTY SERVICES INC.

FILED Mar 07 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 8700 PINES BLVD. 6700 PINES BLVD. HOLLYWOOD FL 33024 HOLLYWOOD FL 33024-7544			failing Address			***** ***** **	*** ***** ***			
						Date Incorporated or Qualified 04/12/1991		te of Last 2/1996		
2. Principal P	lace of Business	2a. Mailin	g Address			4. FEI Number	_!\\		Applied For	
21		26				65-0264195			Not Applicable	
Suite, Apr. #, etc.		Suite,	Suite, Apl. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & Stat	e	City 8	State			6. Election Campaign Financing		\$5.0	0 May Be	
23		28				Trust Fund Contribution			ed to Fees	
: Zip	Country	Zφ		Countr	у	8. This corporation has liability for			r s. 199.032,	
24	25	29		30			Yes [
<u> </u>	g. Name and Address of Cur	rent Registered /	Agenl	81	Name	10. Name and Address of New Re	gistered /	lgent		
6700	NICKI, LEONARD R JR.) PINES BLVD. BROKE PINES FL 33024			83	Street Add	dress (P.O. Box Number is Not Acceptat	ole)	Op 7:	in Code	
				84	City		FL	 85 Zi	ip Code	
SIGNATURE	Ship attain hypertransports around of registered		ible (NC			rporation submits this statement for the pation's board of directors. I hereby acception wired when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE			
TILLE	PO		DELETE	1.1 TITLE		7,007,10,0,0,10,10		Chang		
NAME	BUJNICKI, LEONARD R JR.			1.2 NAME						
STREET ADDRESS	2812 CLEVELAND ST.				T ADDRESS					
CITY - ST - ZiP	HOLLYWOOD FL 33020									
TITLE			DELETE	1.4 CITY- 2.1 TITLE	51-ZIF		·····	Chang	e Additio	
NAME				2.2 NAME	Ī	•				
STREET ADDRESS					T ADDRESS					
				2.4 CITY						
CITY-ST-ZIF TITLE			DELETE	3.1 TITLE	31-11			Chang	e Addition	
NAME			Park It	3.2 NAME	}					
STREET ADDRESS					T ADDRESS					
CITY - ST - ZIP				3.5 STREE						
Tillt			DELETE	4.1 TITLE	OL-TH.			Chang	e Addition	
NAME				4. 2 NAMI	.					
					T ADORESS					
STREET ADDRESS										
C:FY-ST-ZiP			DELETE	4.4 CITY- 5.1 TITLE	31-217			Chang	e Addition	
II.II			L. DECER					THE CHARGE	- L. Modilo	
'NAMÉ				5.2 NAME	1					
STREET ADORESS					T ADDRESS					
CITY-S1-ZII			Dien	5.4 CITY -	ST-ZIP			Chano	n Addition	
TITLE	,		DELETE	6.1 TITLE				Unang	ge 🔲 Addition	
NAME	/			6.2 NAME						
STREET ADDRESS	/			6.3 STREE	T ADDRESS					
CITY - \$1 - 769	· /			6.4 CITY-	ST-ZIP					

intermation supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the instantial 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 of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name 14. I do hereby certify that the information indicated on the Larn an officer or director cappears in Block 12 or filo

Daytime Phone #

Date