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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State

DOCUMEN 1. Corporation Name PROWAY RE	NT# S6432 0	(0)					
,		6 (9)					
	AL ESTATE COMPAN	Y, INC.					
Principal Place of Busi	ness	Mailing Address					
1489 W. PALMETTO PARK ROAD		1489 W. PALMETTO PARK ROAD					
492 BOCA RATON FL 334	uge	492 BOCA RATON FL 334	186				
book intolline w				3. Date Incorporated or Qua 07/05/1991		of Last Re /27/199 :	•
2. Principal Place of E	Business	2a. Mailing Address		4. FEI Number			pplied For lot Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc.		65-0276318	rod 🗆		Additional
22		27		5. Certificate of Status Desi			tequired
City & State		Orty & State		 Election Campaign Finan Trust Fund Contribution 	cing		May Be to Fees
Zip	Country	Zip	Country	8. This corporation has liab			
24	25 lame and Address of Currer	[29]	30	Florida Statutes 10. Name and Address of	Yes No	Agent	
9. N	lame and Address of Currer	it negistered Agent	81 Name	IV. Islanie and Address of	tten riegistorea i	ngom	
GOTTLIEB, BRI	UCE M		82 Street Ad	dress (P.O. Box Number is Not Ad	cceptable)		
125 NORTH 46 AVENUE							
HOLLYWOOD	FL 33021		83				
			84 City		FL	85 Zip	Code
or registered ager familiar with, and	rovisions of Sections 607.0503 nt, or both, in the State of Flori accept the obligations of, Sec	da. Such change was autho	rized by the corporation's bo	oration submits this statement for pard of directors. I hereby accept t	the purpose of cha he appointment as	inging its re registered	egistered office agent. I am
SIGNATUREStgnature	typied or printed name of registerers ager	Land the mapping action	(NOTE: Registered Ayen) signature requ		DATE		
12.		D DIRECTORS	13.	ADDITIONS/CHANGES		DIRECTOR	RS IN 12
NAME OLI	st Veri, angelo	DELETE	1 1 TITLE 1 1.2 NAME		L	Change	
	9 W. PALMETTTO PARK I	ROAD, #492	1.3 STREET ADORESS				
	CA RATON FL		1.4 CHY+ST+ZIP				
TITLE		DEFETE	2 1 TITLE		£	Change	Addition
NAME PROCES LODGES			2.2 NAME 2.3 STREET ADDRESS				
STREET ADDRESS CITY - ST - ZIF			2.4 City-St-7.P				
TITLE		☐ DELETE	3 1 HILE	A A A STIVATO	[Change	Addition Addition
NAME			3.2 NAME				
STREET AODRESS			3.3 STREET ADDRESS				
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NAME			4.2 NAME	200001 -04/11/96-	. ሰሰር 1548 -0102001	ا <u>ئے</u> اور دا	•
STREET ADDIPESS			4 3 STREET ADDRESS	***2400.00	0105001	1 C	
CITY-ST-ZIF		FI Driese	4.4 CITY - ST - ZIP	2100100		T Change	Addition
TITLE		☐ DELETE	5 1 TITLE 52 NAME		L	Change	
NAME STREET ADDRESS			5.3 STREET ADDRESS				
DITY - ST - ZIP			54 CITY-ST ZIP				
TITLE		☐ DELETE	6 1 TITLE			Change	Addition
			6.2 NAME				
NAME			63 STREET ADDRESS : 64 CITY-ST ZIP				
NAME STREET ADDRESS			■ 6413(Y-SUZIE)				
NAME STREET ADDRESS CITY - ST - ZIP	fy that the information supplied	villethis forg is voluntarily f	urnished and does not qualif	y for the exemption stated in Sect	ion 119.07(3)(k), Flo	orida Statut	es I further
NAME STREET ADDRESS CITY: SI-ZIP 14. I do hereby certif certify that the in oath; that I am an	formation indicated on this are noticed or director of the core	rual report or supplemental a	urnished and does not qualificanual report is true and accustee empowered to execute	y for the exemption stated in Sect urate and that my signature shall h this report as required by Chapter	ion 119.07(3)(k), Flo lave the same legal 607, Florida Statut	orida Statut effect as if es; and tha	es. I further made under at my name
NAME STREET ADDRESS CITY: SI-ZIP 14. I do hereby certif certify that the in oath; that I am an	y that the information supplied formation indicated on this arm n officer or director of the Corp in 12 or Block 13 if changed on	rual report or supplemental a	urnished and does not qualificanual report is true and accustee empowered to execute	urate and that my signature shall fi this report as required by Chapter	on 119.07(3)(k), Figure 119.07(3)(k), Figure 119.07(k), Figure 119	errect as in es; and tha	es. I further made under at my name