May 07, 1999 8:00 am Secretary of State

05-07-1999 90091 018 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # \$80031

1. Corporation Name

A & S REAL ESTATE AND DEVELOPMENT, INC.

Principal Place of Business Mailing Address						יופוס יפוו נפווו פפופס יוופס וויפי ופו פופווספו ו		PH 81911 91911 1691
214 ORANGE ST AUBIRNDALE FL 33823		214 ORANGE ST AUBURNDALE FL 33823						
US	2 33323	US			DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualifed 09/12/1991		
Principal Place of Business 2a. Mailing Address						4. FEI Number		Applied For
21	,455 1. 220561	26				59-3104203		Not Applicable
Suite, Apt.	#. etc.	Suite, Apt. #, etc.				_	\$8.7	5 Additional
22		27				5. Certificate of Status Desired —	Fee	Required
City & State		City & State				6. Election Campaign Financing	\$5.0	00 May Be
23		28	28			Trust Fund Contribution	•	ed to Fees
Zìp	Country Zip			у	_	8. This corporation owes the current year In	ntangible	
24	25 29		30			Personal Property Tax.	Yes	□No
	9. Name and Address of Currer	t Registered Agent				10. Name and Address of New Registered	I Agent	
_			81	1 Nan	те			
	'idi, ruth m		82	Stro	et Addre	ess (P.O. Box Number is Not Acceptable)		
214 ORANGE ST				Oliver / Idan				
AUBURNDALE FL 33823				3	_			
			84	4 City		<u> </u>	85 Zi	ip Code
			0*	City		FI	_ " -)
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes	, the abov	ve-nam	ed corpo	oration submits this statement for the purpose of	f changing	its registered
office or i	registered agent, or both, in the State im familiar with, and accept the obliga	of Florida. Such change was auti- tions of Section 607.0505. Florid	horized by la Statute	y the co s.	rporation	n's board of directors. I hereby accept the appo	inumeni as	registered
-	in formal will, and docopt the conge	,						Į
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE: R	egistered Age	ent signate	ire required	when reinstating) DATE		
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A		
TITLE	PD	☐ DELETE	1,1 TITLE		İ		Chang	ge
NAME	SILVIDI, RUTH M		1.2 NAME		1			ì
STREET ADDRESS	2807 WINTERSET PARK DR		1.3 STREE	1.3 STREET ADDRESS				
CITY-ST-ZIP	WINTER HAVEN FL	VINTER HAVEN FL		1.4 CITY-ST-ZIP				
TITLE	STD	☐ DELETE	2.1 TITLE		-		Chang	ge Addition
NAME	ALLEN, JAMES E JR		2.2 NAME					
STREET ADDRESS	THE COLUMN TO SEE THE		2.3 STREET ADDRESS		ss			
CITY-ST-ZIP	AUBURNDALE FL		2.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE		}		Chanç	ge
NAME			3.2 NAME		Ì			
STREET ADDRESS			3.3 STREI	ET ADDRE	ss			i
CITY-\$T-ZIP	-		3.4. CITY-	-ST-ZIP	1			
TITLE		☐ DELETE	4.1 TITLE				Chang	ge 🔲 Addition
NAME			4. 2 NAME	.				
STREET ADDRESS	RESS		4.3 STREET ADDRESS		ss			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP				
TITLE			5.1 TITLE				☐ Chang	ge
NAME			5.2 NAME					
STREET ADDRESS			5.3 STRE	ET ADDRE	:ss			}
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		\top		[] Chang	ge Addition
NAME			6.2 NAME					}
STREET ADDRESS			6.3 STRE	ET ADDRE	ss			1

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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

Ruth Silvidi, President SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING

4/30/99