## 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 # S86161

(4)

MALASKY & SCHERTZ REALTY, INC.

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Mar	11	1997	8:00am
Se	cret	tary o	f State

	ALLER HALL	1111 410 £111	

1300 N FLORID SUITE 15 WEST PALM BE  2. Principal Pla  21 Suite, Apt #  22 Gity & State  23 Zip	ace of Business	2a. Mailing Address 1300 N FLORIDA SUITE 15 WEST PALM BEA  2a. Mailing Addre 26 Suite, Apt. #. 27 City & State 28 Zip	CH FL 33409-525	2		3. Date Incorporated or Qualified 10/09/1991 4. FEI Number 65-0291675 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for incorporation in the status of the status o	<b>04/</b>	\$8.75 Fee B \$5.00 Added	pplied For ot Applicable Additional equired May Be to Fees
24	25	29	30	·			Yes [		
	9. Name and Address of Curr			I		10. Name and Address of New Re	gistered /	gent	
1300	asky, stephen P. ) n florida mango RD (e 15			81 82	Name Street Add	lress (P.O. Box Number is Not Acceptab	le)		
	T PALM BEACH FL 33409			83					
				84	City		FL	<b>85</b> Zip	Code
12. Total	Signature, typed or printed name of registered OFFICERS A PTD MALASKY, STEPHEN P.	agent and title if applicable AND DIRECTORS  DE	13. LETE 11	TITLE	eni signature requ	uired when renstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND	DIRECTO	RS IN 12
NAME STREET ADDRESS CITY-SI-ZIP TITUE	MALASKY, STEPHEN P. 1300 N FLA MANGO RD ∲1 WEST PALM BEACH FL VD	1 <b>5</b>	1.31 1.41	name Street City-5 Title	ADORESS ST-ZIP			Change	RS IN 12 Addition Addition
NAME STREET ADDRESS CITY - ST - ZIP	MALASKY, BRUCE A. 1300 N FLA MANGO RD #1 WEST PALM BEACH FL		22	name Street	r address St - Zip		F.**		
TITLE NAMÉ		D DI	LETE 3.1	TITLE NAME				Change	Addition
STREET ADDRESS					T ADDRESS ST-7IP				
STREET ADDRESS CITY-SY-ZIP TITLE NAME STREET ADDRESS		[_] DI	34. ELETE 4.1 4.2 4.3	CITY- TITLE NAME STREE	ST-ZIP			Change	Addition
STREET ADDRESS C-TY-SY-ZIP TITLE NAME			34. 4.1 4.2 4.3 4.4 ELETE 5.1 5.2	TITLE NAME STREE CITY-S TITLE NAME	ST-ZIP  T ADDRESS ST-ZIP  T ADDRESS			Change	

14. I do 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 any address. STEPHEN P. MALASKY