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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # \$87073

37073

(0)

FLAMINGO REAL ESTATE SALES, INCORPORATED

Principal Place of Business Mailing Address									1 10011616 161 18111	i 18641 Bûtt) 48686 4tt	1 01011 01011 1	TABLE BEBLE MEDIT	Bibit that
1515-1 N.W. 167TH STREET 1515-1 N.W. 167TH STREE													
	: 110-A FL 33169			SUITE 110-A MIAMI FL 33169-5100									
US	TE 33109		US	16 001000100				3.	, Date Incorpora	ted or Qualified	3a. Da	ate of Last R	leport
								10/14/1991		08/	08/1996	·	
2. Pri	incipal Place of Bi	2a. Ma	2a. Mailing Address				4.	, FEI Number		<u></u>	Ar	oplied For	
21	1			26					65-029169	7			ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5.	. Certificate of St	atus Desired		\$8.75	
				City & State								berlupe	
·	City & State			28			6.	 Election Campa Trust Fund Con 			\$5.00	May Be to Fees	
23 Zip		Country		Zip Country			٠.			_=			
24	•	25 29 30				•		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
	g, Na	d Agent	lgent				10. Name and Address of New Registered Agent						
	PERALTA, J	UDITH				81	Name						
		187TH STREET				82 Street Address (P.O. Box Number is Not Acceptab				ble)			
	SUITE 110-A												
	MIAMI FL 33	3169				83							
						84	City					85 Zip	Code
			AF.00	(F00 F: 11 0)							FL		
0	iffice or real-stered	visions of Sections 607 agent, or both, in the S	tate of Florida.	Such change was	authoriz	zed by	the corpo	orporation's	on submits this si board of director	atement for the s. I hereby acce	purpose or pt the app	r changing it xointment as	ts registered registered
â	igent. Lam familiar	with, and accept the c	bligations of, Se	ection 607.0505, F	Florida St	tatutes	3.						
SIGN	ATURE	ped or proted name of registers	d apply and the Hear	sheakle CAP	TE: Oppide	red Ann	ni signature r	and the second second	no roinotation)		DATE	······	
12.	Signative ty		AND DIRECTO		JIE. Noglale		in signature r		ADDITIONS/CHA	NGES TO OFFI		DIRECTOR	RS IN 12
TULE	PSD			DELETE		TITLE		******				☐ Change	Addition
NAME	PERAL	.ta, judith			1.2	NAME	.						
STREET	STREET ADDRESS 1515-1 N.W. 167TH STREET, SU			TE 110-A 1.35			ADDRESS						
CHY-S	T-ZIP MIAMI	FL 33169			1.4	CITY-S	T-ZIP						
Tille				☐ DELETE	21	TITLE						Change	Addition
NAME					22	NAME	į						
STREET	ADDRESS				23	STREET	ADDRESS						
CHY-S	1 - ZIP					4 CITY - S	ST - ZIP			····			
TITLE				☐ DELETE	31	TITLE						Change	Addition
NAME					32	NAME							
	ADDRESS						ADDRESS						
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				C) perete	1	TITLE	l					Change	L MOUITION
NAME	Alternative					2 NAME	4000000						
ĺ	ADDRESS						ADDRESS						
CITY S TITLE	1 - 20-			DELETE		CITY-S	1-ZIP					☐ Change	Addition
NAME					1	NAME							
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CHY-S					1	CITY-S							
TITLE		······································		DELETE		TITLE						Change	Addition
NAME						NAME						-	
STREET	ADDRESS				63	STAEET	ADDRESS						
CITY-S	I - ZIP				1	CITY-S							
14.	do hereby certify	that the information sur	plied with this fi	ling does not qua	lify for th	ie exe	motion sta	ated in S	ection 119.07(3)(i), Florida Statute	s. I furthe	r certify that	the
"	am an officer or d	ed on this arinual report lirector of the corporation 2 or Book 13 if change	or supplementa in or the receive	ar annual teport is er or traster empo	wered to	O EXEC TROCK	nate and ute this re	port as r	signature shall ha required by Chap	ve trie same iegi ter 607, Florida :	ai ellect as Statutes; a	s ii made un ind that my i	name
a	ippears in Block 1	2 or Block 13 if change	d, or on an attac	chmy int with an a	ddress.				,	/	. ,		

SIGNATURE:

CHATCHE AND TYPE OF PRINTED NAME OF SIGNING DEFICER OF DIRECTOR

4/7/97 (305)623-9988

FILED

May 19 1997 8:00am

Secretary of State

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