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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

6TH FLOOR

ORI ANDO EL 32801

**6TH FLOOR** 

ORLANDO FL 32801

**DOCUMENT #** 1. Corporation Name AMERICAN REAL ESTATE AGADEMY, INC



ORLANDO FL 32901 US			ORLANDO FL 32801 US				3.	Date Incorporated or Qualified 01/17/1992		ate of Last Report <b>05/01/1995</b>			
21	2.111100011000			2a. Mailing Address 25 Suite, Apt. #, etc.				4. FEI Number 59-3108090			Applied For Not Applicable		
Suite, Apt. #, etc.			27					5. Certificate of Status Desired \$8.75 Additional Fee Required					
23	City & State			City & State				6.	. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
24	Zip			Count	ountry				□ No				
	9. Name	and Address of Curre	ent Regis	stered Agent	6	31	Name	10	Name and Address of New R	egistered A	gent		
PINO, LAURENCE J. 255 S. ORAGNE AVE. 6TH FLOOR ORLANDO FL 32801						32 33	Street Addres	ddress (P.O. Box Number is Not Acceptable)					
						84	City			FL	85	Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _	Ignature, typed or punied name of registered agent and the diaboral	(NETTE FEE	grateria: Agent Signat ne recore.	t when perstatings DATE
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PDT	☐ DELETE	1 1 TITLE	☐ Change ☐ Addition
NAME	PINO, LAURENCE J		1.2 NAME	
STREET ADDRESS	255 S. ORANGE AVE. 6TH FLOOR		1.3 STREET ADDRESS	
	ORLANDO FL 32801		1.4 CHY-ST-ZIP	
CITY-ST-ZIP TITLE	D	DELETE	2 1 THLE	☐ Change ☐ Addition
NAME	WILSON, PATRICIA T		2.2 NAME	
	255 S. ORANGE AVE. 6TH FLOOR		2.3 STREET ADDRESS	
STREET ADDRESS	ORLANDO FL 32801	İ	2.4 CiTY+ST+ZIP	
CITY-ST-ZIP	ONDAINDO FE 32001	[ ] DELETE	3 1 TITLE	Change Addition
TITLE			3.2 NAME	
NAME				
STREET ADDRESS			3.3 STREET ADDRESS	900001780250
CITY - ST - ZIP			3.4 CITY - S1 - 7:P	90001788259 -04/22/96-01025-0[] Change   Addition
TITLE		DELETE	4 1 1111.6	***200.00
NAME			4.2 NAME	***200.00
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY - S1 - ZIP	
TITLE		DELETE	5 1 TITLE	Change Addition
NAME			5.2 NAME	
STREET ADDRESS			5.3 STREET ADDRESS	
CITY - ST - ZIP			5.4.00Y+S1-7IP	Change Addition
TITLE		DELE IE	6 TTIFLE	Crange Addition
NAME			6.2 NAME	
STREET ADDRESS			6 3 STREET ADDRESS	
CITY-ST-ZIP			6.4 CiTY - ST - ZiP	
O111 a C 20			1 1 1	for the everytion stated in Section 119 07(3)(k). Florida Statutes, Lighther

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify that I am an officer or director of the corporation or the receiver or trustee engoingered to produce this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes or on an attention on twith an address.

SIGNATURE:

SIGNATURE AND TYPED OR POINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/1/96 407-425-783