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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(5)

POLITIS & PERLMAN INTERNATIONAL REALTY, INC.

FILED Feb 18 1998 8:00am Secretary of State



	RD STREET I BEACH FL 33160 lace of Business	NORTH MIAMI BEAC	3969 NE 163RD STREET NORTH MIAMI BEACH FL 33160 28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/04/1992 4. FEI Number 65-0325422 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing Trust Fund Contribution 3. This corporation owes or has paid the current year Intangible		
24	25	29 30				Personal Property Tax due June 30.		
	9. Name and Address of Curr		1201			10. Name and Address of New Registered	-	
PO	LITIS, GEORGE			81	Name			
3969 NE 163RD STREET				82	Street Add	ress (P.O. Box Number is Not Acceptable)		
NORTH MIAMI BEACH FL 33160				00				
				83				
				84	City	FI	85 Zip	Code
office or r agent. I a SIGNATURE	agistered agent, or both, in the Sta m familiar with, and accept the obt	ate of Florida. Such change v ligations of, Section 607.050!	was authorize 5, Florida Stat	d by lute:	y the corpora s.	poration submits this statement for the purpose tion's board of directors. I hereby accept the ap	of changing i pointment as	its registered s registered
12.	Signature, Typied or printed harrin of registered a OF FICERS A	AND DIRECTORS	NOTE: Registered	d Age	ent signature requi	ired when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	R\$ IN 12
TITLE	PTS	DELETE 1.1		TLE			Change	Addition
NAME	POLITIS, GEORGE	1.2 N		AME				1,
STREET ADDRESS	3969 NE 163RD STREET		1.3 STREET ADDRESS		ADDRESS			ļį
CITY-ST-ZIP	NORTH MIAMI BEACH FL 3	·			ST-ZIP		1 05	1 4 44000
TITLE		☐ DELETE	DELETE 2.1 T				L Change	☐ Addition ☐
NAME STREET ADDRESS			2.2 NA		ADDRESS			1
CITY-ST-ZIP					ST-ZIP			
TITLE		DELETE					Change	Addition
NAME			3.2 NA	AME				-
STREET ADDRESS			3.3 ST	REET	ADDRESS			ļ
CITY-ST-ZIP					ST-ZIP			
TITLE		DELETE					L Change	Addition
NAME CORET ADODECC			4.2 N		ADDRESS			
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TITLE	<u> </u>	☐ DELETE			11-214		Change	Addition
NAME			5.2 NA		ĺ		-	
STREET ADDRESS			5.3 ST	REET	ADDRESS			
CITY-ST-ZIP			5.4 CI	TY-S	T - ZiP			
TITLE		☐ DELETE					Change	L.] Addition
NAME			6.2 NA					ļ
STREET ADDRESS			6.3 ST	REET	ADDRESS			į.

CITY-ST-ZIP 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 oddress.

SIGNATURE: