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 # V25084

(7)

REALTY CONSULTANTS NETWORK, INC.

Principal Place of Business 1855 GRIFFIN RD SUITE B-408 DANIA FL 33004		Mailing Address 1855 GRIFFIN RD SUITE B-408 DANIA FL 33004-2242 US		3. Date Incorporated or Qualified		
US		03			03/30/1992	3a. Date of Last Report 02/05/1996
2. Principal P	ace of Business	2a. Mailing Address 26			4. FEI Number 65-0324977	Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Zip	Country	28 Zip	Countr	y	Trust Fund Contribution 8. This corporation has liability for	Added to Fees intangible tax under s. 199.032,
24	25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent	
SCH	ULTZ, DANIEL M.		81	Name		
1855	GRIFFIN RD		82	Street	Address (P.O. Box Number is Not Acceptate	ole)
DAN	A FL 33004		83	1		
			84	City		FL 85 Zip Code
office or r agent. La SIGNATURE	Stignative hypodor proceding of registered ag	ent and title if applicable. (NOTE:	Registered Ap		d corporation submits this statement for the proporation's board of directors. I hereby acce	2/17 DATE
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	Change Addition
11TLE	SCHULTZ, DANIEL	☐ DELETE	1.1 TITLE		schulte, Daniel	Y ' '
NAME :	7153 VALENCIA DR		1.2 NAME		20981 VERANO WAY BOCA RATION PL 5	10-
STREET ADDRESS	DOCA DATON EI			T ADDRESS	BOCA RATION PL 5	3433
CHTY - ST - ZIP		☐ DELETE	1.4 C(TY- 2.1 TITLE			Change Addition
NAME		22 N			•	
STREET ADDRESS			2.3 STREE	T ADDRESS		
CHY-SI-ZIP			2. 4 CITY	ST-ZIP	Tap.	
TITLE		DELETE	3 1 TITLE			Change Addition
NAME	İ		3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CHY-ST-ZIP			3.4. CITY	- ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAM	Ē		
STREET ACCRESS			4.3 STREE	T ADDRESS		
CITY- ST- ZIP			4.4 CITY-	ST-ZIP		
TITLE	A AMAZONIA	DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			.
STREET ACCRESS			5.3 STREE	T ADDRESS		,
COLY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		DELETE	6.1 TITLE			Change Addition

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 good attor 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 an attachment with an address.

6.4 CITY-\$T-ZIP

6.3 STREET ADDRESS

6.2 NAME

SIGNATURE:

NAME

STREET ADDRESS

DANIEL SCHULL

FILED

Feb 11 1997 8:00am

Secretary of State