

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # V33908**

1. Entity Name

REAL ESTATE CITY, INC.**FILED**
Apr 25, 2000 08:00 AM
Secretary of State

Principal Place of Business

782 MONACO DR

Mailing Address

782 MONACO DR

PUNTA GORDA
339508018

US FL

PUNTA GORDA
33950

US FL

2. Principal Place of Business

PARK POINT PLAZA, 2511 VASCO STREET

3. Mailing Address

PARK POINT PLAZA, 2511 VASCO STREET

Suite, Apt. #, etc.
UNIT #119Suite, Apt. #, etc.
UNIT #119City & State
PUNTA GORDA

FL

City & State
PUNTA GORDA

FL

Zip
33950Country
USZip
33950Country
US

4. FEI Number

65-0327184

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

GRAVELL, JEAN-PAUL JAE
782 MONACO DR**PUNTA GORDA**
33950

US FL

7. Name and Address of New Registered Agent

Name

GRAVELL JEAN-PAUL JPRES

Street Address (P.O. Box Number is Not Acceptable)

PARK POINT PLAZA, 2511 VASCO STREET

UNIT #119

City

PUNTA GORDA**FL**Zip Code
33950

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE **JEAN-PAUL J GRAVELL**

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/25/2000

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back)**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE
NAME **C GRAVELL JEAN-PAUL J** ☐ Delete
STREET ADDRESS **782 MONACO DR**
CITY-ST-ZIP **PUNTA GORDA FL 33950**TITLE
NAME **PDTS GRAVELL, JEAN-PAUL JAE** ☐ Delete
STREET ADDRESS **782 MONACO DR**
CITY-ST-ZIP **PUNTA GORDA FL 33950**TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME ☐ Change ☐ Addition
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: JEAN-PAUL J GRAVELL

DATE: 04/25/2000