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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS V40708 **DOCUMENT #** REALITY BUILDERS, INC. Principal Place of Business Mailing Address PCB 351 POB 351



JUPITER FL 33468		JUPITER FL 33468					
					3. Date la constitue or Qualified	3a. Date	/25/1995
Principal Place of Business 21		2a, Maling Address 26			4. FET Number 65-0338593 Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required
Crty & State		City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip <b>24</b>	Gountry <b>25</b>	Zip 29	Countr 30	y		No.	
	9. Name and Address of Current F	Registered Agent	81	T No.	10. Name and Address of New R	egistered Ag	ent
VAN HA	ANDEL, EDWARD A.			Name			
3064 SE RANCH ACRES CIR			82 Street Ad		ddress (P.O. Box Number is Not Acceptable)		
	R FL 33478		83				
			84	City		Fi	85 Zip Code
SiGNATURE	d agent, or both, in the State of Florida a, and accept the obligations of, Section treating types of critist manifolish, dead agents.	i 607.0500, Fiorida Statutes	š		ration submits this statement for the pur ind of oirectors. Thereby andept the apport	DAN	gistered agent. Lani
12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFF		BECTORS IN 12
THE	VAN HANDEL EDWARD A	DELETE	I 1 TITLE				Change Addition
NAME	VAN HANDEL, EDWARD A. 3064 SE RANCH ACRES CIR		1.2 NAME				
STREET ADDRESS	JUPITER FL		13 STAEL	LACORESS			
CHTY - ST - ZIP			14 CI Y -	S1-7P			
TITLE	van Handel, Kathleen	DETELE	2 ≥ THTU€				Change 🔲 Addit on
NAME	3064 SE RANCH ACRES CIR		2.2 NAME				
STREET ADDRESS	JUPITER FL		2.3 STHEE	ADDRESS			
CITY - ST - ZIP TITLE		DECETE	2 4 CI*Y -	S!- 70:			G
NAME		Director	3 1 TITLE			L.J	Change [ Addition
STREET ADDRESS			3.2 NAME	LANDHESS			
CITY-ST-ZIP			3.3 SINE 3.4 CITY -				
TIFLE		DELETE	4 : 11TLE	** ***		П	Change
NAME		_	4.2 NAME				- 5
STREET ADDRESS			4.3.S1HEE	F ADDRESS			
CITY-ST-ZIP			4.4 CITY	S' - Z.P			
TITLE		[_] DELETE	5 t DILLE				Change 🔲 Addition
NAME			5.2 NAME				
STREET ADDRESS			5 3 STREE	T ADDRESS			
City-St-ZiP			5 4 CITY -	ST - 7:P		<u>.</u>	
THTLE		DELETE	6 1 TIFLE				Change
NAME SARSSE ARGOSOO			6.2 NAME				
STREET ADDRESS				FADDALS5			
CITY - ST - ZIP			64 Cily -	ST-ZiP			

14. I 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 furnier 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 cath, that I am an officer or director of the corporation or the re-eigenver 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

SIGNATURE: