PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 20, 1999 8:00 am Secretary of State

02-20-1999 90109 039 ***150.00

DOCUMENT # **V54483**

1. Corporation Name

SCHWARZ REALTY GROUP, INC.

			V. 46-4					
		Mailing Address	Georgia Karl Sales of	ACCUPANTED IN	The first of the second second second second section is	地址出版了新考证	经验证的证据	north little of the
Principal Place of Business 457 SOUTH RIDGEWOOD AVENUE		457 SOUTH RIDGEWOOD AVENUE DAYTONA BEACH FL 32114						
DAYTONA BEACH FL 32114		DATIONA BEACH FE 32114			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed			
					07/23/1992			
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number			lied For
21		26			59-3136325			Applicable_
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certifcate of Status Desired		\$8.75 Ad		
22		27						
City & State		City & State		6. Election Campaign Financing		\$5.00 M	,	
23		28		Trust Fund Contribution		. Added to	rees	
Zip	Country	Zip	Coi	intry	8. This corporation owes the curr	rent year Int	angible Yes [□No
24	25	29	30		Personal Property Tax.	Ongietorod		
	9. Name and Address of Current	Registered Agent		1241	10. Name and Address of New I	Registered	Agent	
				81 Name				
SCHWARZ, EDWARD L.				82 Street Add	ress (P.O. Box Number is Not Accept	able)		
457 SOUTH RIDGEWOOD AVE.								——- - -
DAYT	ONA BEACH FL 32114			83				
				84 City			85 Zip C	ode
i				1 1 1		FL	- han sing ita i	rogistored
11. Pursuant to office or reasont Lau	to the provisions of Sections 607.0502 egistered agent, or both, in the State of m familiar with, and accept the obligat	2 and 607.1508, Florida S of Florida. Such change w ions of, Section 607.0505	tatutes, the a as authorize , Florida Sta	above-named cor d by the corporat tutes.	poration submits this statement for the ion's board of directors. I hereby acce	pt the appoi	intment as reg	istered
=						DATE		
SIGNATURE	Signature, typed or printed name of registered agen	and the opposite		d Agent signature requir	ed when reinstating) ADDITIONS/CHANGES TO O		ND DIRECTO	RS IN 12
12.	OFFICERS AN		13		ADDITIONS/CHANGES TO O	T TOENO A	☐ Change	Addition
TITLE	D	☐ DELET		NTLE			_	
NAME	SCHWARZ, EDWARD L.			VAME				ļ
STREET ADDRESS	457 SOUTH RIDGEWOOD AVE.			STREET ADDRESS				,
CITY-ST-ZIP	DAYTONA BEACH FL			CITY-ST-ZIP			Change	Addition
TITLE		☐ DELET		TITLE			_ •	_
NAME				NAME				1
STREET ADDRESS			2.3	STREET ADDRESS				
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CITY-ST-ZIP				CITY-ST-ZIP			☐ Change	Addition
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NAME				NAME				
STREET ADDRESS			4.3	STREET ADDRESS				
CITY-ST-ZiP				CITY-ST-ZIP			Change	Addition
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NAME				NAME				
STREET ADDRESS	5			STREET ADDRESS				
CITY-ST-ZIP				CITY-ST-ZIP			Change	Addition
TITLE	Ţ	☐ DELE	·-	TITLE				
NAME				NAME				
STREET ADDRESS	3			STREET ADDRESS				
CITY-ST-7IP			6.4	CITY-ST-ZIP		16.46	artifuthat the i	information

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 is 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 address, with all other like empowered.

SIGNATURE:

ALL LINE AND TYPED OR PRINTED NAME OF JIGNING OFFICER OR DIRECTOR

2/9/99

904-258-0555

Daytime Phone

R2F034 (11/98