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 # V63716 (7) 1. Corporation Name ALL CONCH REALTY, INC.					
Principal Place of Business 2825 HARRIS AVENUE KEY WEST FL 33040 US		Mailing Addross P.O. BOX 2961 KEY WEST FL 33045 US			E IN THIS SPACE
	Place of Business	2a. Mailing Address		09/15/1992 4. FEI Number	Applied For
		Suite, Apt. #, etc.		65-0358294	Not Applicable
22 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has p	aid the current year Intangible
24	25		30	Personal Property Tax due Juni	
	9. Name and Address of Current	Registered Agent	04	10. Name and Address of New R	egistered Agent
	CAPITAL CONNECTION, INC.		81 Name		
417 E VIRGINIA ST			82 Street A	ddress (P.O. Box Number is Not Accepta	ble)
SUITE 1			83		
'	ALLAHASSEE FL 32301				
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statute	es the above-named o	corporation submits this statement for the	purpose of changing its registered
office or r	egistered agent, or both, in the State o	Florida Such change was a	authorized by the corpo	pration's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE	and the state of t	Sind 01, 000001 001,0000, 110	maa olalatoo.		
SIGNATURE	Signature, typed or printed name of registered agent		Registered Agent signature re	equired when reinstating)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PVPC	[_] DELETE	1.1 TITLE	4	Change Addition
NAME	ALVAREZ, MAGALI VIDAL 2828 HARRIS AVE		1.2 NAME	2825 HARRIS A	
STREET ADDRESS	KEY WEST FL		1.3 STREET ADDRESS	SASS HARRIS 14	ve.
CITY-ST-ZIP TITLE	RET WEST PL	DELETE	14 CITY-ST-ZIP		Change Addition
NAME	FIONA MARY HOUGHTON	E. Bereit	22 NAME		C. Criange C. Prisonisis
STREET ADDRESS	2825 HARRIS AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	KEY WEST FL		2.4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY - ST - ZIP		
TITLE		DELETE	4.1 TITLE		L Change L Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - \$1 - ZIP		DELETE	4.4 CITY - ST - ZIP		Change Addition
THTLE		L) VELETE	5.1 TITLE		Change Addition
NAME CTREET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - \$1 - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY+\$T-ZIP			6 4 CiTY-ST-ZIP		
	ertify that the information supplied with	this filing does not qualify fo		in Section 119.07(3)(i), Florida Statutes. I	further certify that the information

officer or director of the corporation or the receiver or trustee anoward to exemplor state in section 13.0.7(3)(i), honde statutes. Further certify that the information indicated on this annual report or supplier-incital annual report is sue 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 ampoward to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapted, or on an attack point with address.

SIGNATURE:

(305) 296-4477

FILED

Jan 21 1998 8:00am

Secretary of State