FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

	1997	Sn 500	DIVISION OF	CORPORAT	TIONS	5001011	a y O		aco
 Corporatio 	MENT # V708 6 Name EALTY ADVISORS, INC.	86	(9)) 1671) BUBII 18811 BESBI 18101 SBUB		a n au n a nn	141i 111
			ng Address KANE CONCOURSE HARBOR FL 33154-2		······································				
						3. Date Incorporated or Qualifie 10/14/1992	3a. Da 03/2	te of Last R 5/1996	eport
, L	lace of Business	<u> </u>	2a. Mailing Address			4, FEI Number 65-0363496		— 	plied For
Suite Apt	# ote	26	uite, Apt. #, etc.			0370303490		\$8.75 /	t Applicable
22	# EILG.	27	uite, Apr. w, etc.			5. Certificate of Status Desired	K)	Fee Re	
City & Stat	е		ity & State			Election Campaign Financing Trust Fund Contribution	.0	\$5.00 Added t	
Zip	Country	7	ip	Count	try	B. This corporation has liability f			199.032,
24	25	29		30		Florida Statutes	Yes L		
TAD	9, Name and Address of Cu LIN, MARTIN W	urrent Hegistei	rea Agent		1 Name	10. Name and Address of New	Registered A	(gent	
	7 KANE CONCOURSE			_					
	TE 201			le le	Stree	Address (P.O. Box Number is Not Accep	table)		
	HARBOR FL 33154			8	13				
5								Tall 5	
					City		FL	85 Zip t	Code
office or lagent. Fa	am familiar with, and accept the o	obligations of, \$	iaction 607,0505, F	lorida Statu	tes.	d corporation submits this statement for the rporation's board of directors. I hereby ac		changing it	registered registered
12.	Signature Typed or profed name of register OFFICERS	red agent and title if a S AND DIRECT		TE: Registered	Agent signatu	e required when reinstating) ADDITEONS/CHANGES TO OF	DATE FICERS AND	DIRECTOR	29 IN 12
TILE	DP	S AND DIRECT	DELETE	1,1 TiTL	E	T ADDITIONS/CHANGES TO DE	FICENS AND	Change	Addition
NAME	TAPLIN, MARTIN W.			1.2 NAM					7
STREET ADDRESS	1177 KANE CONCOURSE			1.3 STR	EET ADDRESS		211	3	3154
CITY+ST-ZIP	BAY HARBOR FL			1,4 CITY	-ST-ZIP	33154			
11 [LF			DELETE	2.1 TITL	E	S		Change	x Addition
NAME				22 NAM	IE	Silva, Osmilda			
STREET ASIDRESS				2.3 STR	eet address	1177 Kane Concourse,	Suite	201	
CITY - ST - ZOP			T DELETE		Y-ST-ZIP	Bay Harbor, FL 3315	4	TT AS	The same
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NAME			☐ DELETE		E			Change	Addition
			DELETE	5.1 TITL 5.2 NAM	E			Change	Addition
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NAME STREET ADDRESS CITY SE-ZIP THEE			☐ DELETE	5.1 TITL 5.2 NAM 5.3 STRI 5.4 CITY (6.1 TITL	E HE EET ADDRESS (-ST-ZIP E			Change	Addition
NAME STREET ADDRESS CITY SE-ZIP				5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITL 6.2 NAM	E HE EET ADDRESS (-ST-ZIP E			•	

6.4 CITY-ST-ZIP

SIGNATURE:

14. I do hereby certify that the information supplied with this filling information indicated on this annual report or supplied entail I am an officer or director of the corporation or the receiver appears in Block 12 or Block 13 if changing, of in an entail action.

CITY+ST-ZIP

REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNANG OFFICER OR DI Martin W. Taplin, as President NAME OF BIGNING OFFICER OR DIRECTOR

is not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes, I further certify that the all report is true and accurate and that my signature shall have the same legal effect as if made under oath; that stee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name with an address.

(305)865-5760

FILED

Apr 24 1997 8:00am

Secretary of State

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