2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 04, 2005 08:00 AM Secretary of State DOCUMENT # F97000006156 1. Entity Name TATÉ TERRACE REALTY INVESTORS, INC. Principal Place of Business Mailing Address 448 VIKING DR., #220 448 VIKING DR., #220 VIRGINIA BEACH, VA 23452 VIRGINIA BEACH, VA 23452 No Cha-P CR2E034 (10/03) 03172005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 54-1540695 Not Applicable \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY DO NOT WRITE 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 IN THIS SPACE 3. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable, (NOTE Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. TITLE NAME SANDLER, STEVEN B STREET ADDRESS 221 76TH ST. VIRGINIA BEACH, VA 23451 CITY-ST-ZIP TITLE 04/04/05-80022-005 150.00 NAME BENSON, NATHAN D STREET ADDRESS 448 VIKING DR., #220 CITY-ST-ZIP VIRGINIA BEACH, VA 23452 SD TITLE SANDLER, ARTHUR B NAME STREET ADDRESS 536 REDGATE AVE. DO NOT WRITE CITY-SY-ZIP NORFOLK, VA 23507 IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

D NAME OF SIGNING OFFICER OR DIRECTOR

FILED