

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H73139

Entity Name: AVIGNON REALTY, INC.

FILED  
Mar 26, 2008  
Secretary of State

**Current Principal Place of Business:**

77 HARBOR DRIVE  
#30  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

77 HARBOR DRIVE  
#30  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 59-1737207      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

RUIZ, JOSE A A  
77 HARBOR DRIVE  
#30  
KEY BISCAYNE, FL 33149 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: HERRERA, JOSE PD  
Address: 77 HARBOR DRIVE, #30  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: SD ( ) Delete  
Name: RUIZ, JOSE A SD  
Address: 77 HARBOR DRIVE, #30  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: TD ( ) Delete  
Name: TORRES, ALICIA H TD  
Address: 77 HARBOR DRIVE, #30  
City-St-Zip: KEY BISCAYNE, FL 33149

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JARUIZ

SD

03/26/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date