

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2006 8:00 am
Secretary of State

04-12-2006 90080 037 ****61.25

DOCUMENT # N04000003011

1. Entity Name
REAL LIFE INTERNATIONAL CORP.



Principal Place of Business
**6770 INDIAN CREEK DR., STE. #TSK
MIAMI BEACH, FL 33141**

Mailing Address
**6770 INDIAN CREEK DR., STE. #TSK
MIAMI BEACH, FL 33141**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.
3938 SW 58TH AV

Suite, Apt. #, etc.
3938 SW 58TH AV

City & State
MIAMI FL

City & State
MIAMI FL

Zip
33155 Country
US

Zip
33155 Country
US

04082006 Chg-NP CR2E037 (11/05)

4. FEI Number
20-1047143

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**STAMP, STEVE
6770 INDIAN CREEK DR., STE. #TSK
MIAMI BEACH, FL 33141**

7. Name and Address of New Registered Agent

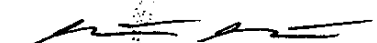
Name **STAMP STEVE**

Street Address (P.O. Box Number is Not Acceptable)

3938 SW 58TH AV

City **MIAMI** FL Zip Code **33155**

8. 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)

4/10/06

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD
NAME **STAMP, STEVE** ☒ Delete
STREET ADDRESS **6770 INDIAN CREEK DR., STE. #TSK**
CITY-ST-ZIP **MIAMI BEACH, FL 33141**

TITLE VD
NAME **STAMP, MARIA** ☒ Delete
STREET ADDRESS **6770 INDIAN CREEK DR., STE. #TSK**
CITY-ST-ZIP **MIAMI BEACH, FL 33141**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD **STAMP STEVE** ☒ Change ☐ Addition
NAME
STREET ADDRESS **3938 SW 58TH AV**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE VP **STAMP MARIA** ☒ Change ☐ Addition
NAME
STREET ADDRESS **3938 SW 58TH AV**
CITY-ST-ZIP **MIAMI FL 33155**

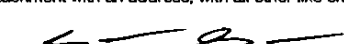
TITLE SEC **JULIAN TORRES** ☐ Change ☒ Addition
NAME
STREET ADDRESS **6941 SW 162 COURT**
CITY-ST-ZIP **MIAMI FL 33193**

TITLE TR **TERESITA BENITEZ** ☐ Change ☒ Addition
NAME
STREET ADDRESS **3938 SW 58TH AV**
CITY-ST-ZIP **MIAMI FL 33155**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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.

SIGNATURE: 
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/10/06 **305 205 5426**
Date Daytime Phone #