


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000098688

1. Entity Name  
MICHIGAN REAL ESTATE HOLDINGS, INC.



FILED  
07 MAY 18 AM 10:44  
STATE  
MIAMI, FLORIDA

Principal Place of Business: 848 BRICKELL KEY DRIVE, APT. 1201, MIAMI, FL 33131

Mailing Address: 9350 SOUTH DIXIE HWY, SUITE 1500, MIAMI, FL 33156



03132007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number: 03-0421842 Applied For: Not Applicable

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

6. Name and Address of Current Registered Agent

SEGERDO, FRANK J ESQ  
9350 SOUTH DIXIE HWY  
SUITE 1500  
MIAMI, FL 33156

**DO NOT WRITE IN THIS SPACE**

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: \_\_\_\_\_ DATE: \_\_\_\_\_

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	CARBONE, SEBASTIANO
STREET ADDRESS	848 BRICKELL KEY DRIVE, APT 1201
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	D
NAME	DE CARBONE, MARIA S
STREET ADDRESS	848 BRICKELL KEY DRIVE, APT 1201
CITY-ST-ZIP	MIAMI, FL 33131
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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06/05/07--01015--005 \*\*1000.00

**DO NOT WRITE IN THIS SPACE**

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 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.

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

Date: \_\_\_\_\_ Daytime Phone #: \_\_\_\_\_