2005 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2005 08:00 AM Secretary of State DOCUMENT # P02000040954 1. Entity Name CHOİCE REALTY OF MIAMI, INC. Principal Place of Business Mailing Address 7211 SW 62ND AVE. 7211 SW 62ND AVE. SUITE 117 SUITE 117 MIAMI, FL 33143 MIAMI, FL 33143 04202005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 43-1957324 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent WEISS, ROBERT JAY DO NOT WRITE 7211 SW 62 AVE. **SUITE 117** IN THIS SPACE MIAMI, FL 33143 --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 (NOTE Registered Agent signature required when reinstaling) Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE WEISS, ROBERT JAY NAME STREET ADDRESS 10120 SW 83 AVE CITY-ST-ZP MIAMI, FL 33156 U00000326008 04/23/05-80039-012 150.00 TITLE STREET ADDRESS CITY-ST-ZIP TIRE NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 either like empowered

SIGNATURE: AMIN'S

STREET ADDRESS CITY-ST-ZIP

TYPICO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305 389-6343

FILED