

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Sep 05, 2006 08:00 AM
Secretary of State

DOCUMENT # P04000040861 1. Entity Name FAMILY FIRST PROPERTY/INVESTMENT INC.	
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Principal Place of Business 17221 N.W. 43 COURT MIAMI, FL 33055	Mailing Address 17221 N.W. 43 COURT MIAMI, FL 33055
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DO NOT WRITE IN THIS SPACE



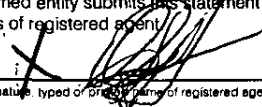
08172006 No Chg-P CR2E034 (11/05)

4. FEI Number 56-2441748	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**ROBERTS-HARPER, ORPHA M
17221 N.W. 43 COURT
MIAMI, FL 33055**

**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:  (NOTE: Registered Agent signature required when reinstating) DATE: _____

**FILE NOW!!! FEE IS \$150.00
Due by September 6, 2006**

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

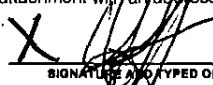
10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROBERTS-HARPER, ORPHA M 17221 N.W. 43 COURT MIAMI, FL 33055
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HARPER, ANDRE A 17221 N.W. 43 COURT MIAMI, FL 33055
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD HARPER, SALMA 3131 ENSENADA WAY MIRAMAR, FL 33025
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

000000576147
09/05/06-80011-001 150.00

**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:  **8-16-06**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #