

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**FILED
Mar 20, 2006
Secretary of State**

DOCUMENT# P05000065665

Entity Name: ASTOR INTERNATIONAL REALTY, INC.

Current Principal Place of Business:

C/O ASTOR DEVELOPMENT GROUP, LLC
2601 SOUTH BAYSHORE DRIVE, SUITE 1800
MIAMI, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

C/O ASTOR DEVELOPMENT GROUP, LLC
2601 SOUTH BAYSHORE DRIVE, SUITE 1800
MIAMI, FL 33133

New Mailing Address:

FEI Number: 20-2838233 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGISTERED AGENTS OF FLORIDA, LLC
100 SOUTHEAST SECOND STREET
SUITE 2900
MIAMI, FL 33131 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: NOYA, JORGE
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 1800
City-St-Zip: MIAMI, FL 33133

Title: VSTD () Delete
Name: TORRES, PETER A
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 1800
City-St-Zip: MIAMI, FL 33133

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VST (X) Change () Addition
Name: TORRES, HENRY
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 1800
City-St-Zip: MIAMI, FL 33133

Title: D () Change (X) Addition
Name: TORRES, PETER A
Address: 2601 SOUTH BAYSHORE DRIVE, SUITE 1800
City-St-Zip: MIAMI, FL 33133

I hereby certify that the information supplied with this filing does not qualify for the 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: PETER A. TORRES

D

03/20/2006

Electronic Signature of Signing Officer or Director

Date