

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000010927

Entity Name: FIRST DREAM REALTY INC.

FILED  
Apr 30, 2008  
Secretary of State

## Current Principal Place of Business:

3195 FOXCROFT ROAD  
204 F  
MIRAMAR, FL 33025 US

## New Principal Place of Business:

## Current Mailing Address:

3195 FOXCROFT ROAD  
204 F  
MIRAMAR, FL 33025 US

## New Mailing Address:

FEI Number: 76-0814821

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ST ALBORD, LOUINEL  
14028 SW 54 ST  
MIRAMAR, FL 33027 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ST ALBORD, LOUINEL  
Address: 14028 SW 54 ST  
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP ( ) Delete  
Name: DURAND, NANCY  
Address: 14028 SW 54 ST  
City-St-Zip: MIRAMAR, FL 33027 US

Title: VP ( ) Delete  
Name: FERRER, SERGE  
Address: 120 OAKLAND PARK BLVD.#105  
City-St-Zip: FORT LAUDERDALE, FL 33334 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: LOUINEL ST ALBORD

PD

04/30/2008

Electronic Signature of Signing Officer or Director

Date