

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000045755

Entity Name: S.B. RE INVESTMENTS, INC.

FILED
Mar 22, 2004
Secretary of State

Current Principal Place of Business:

6550 NORTH FEDERAL HWY.
STE. 240
FT. LAUDERDALE, FL 33308 US

New Principal Place of Business:

Current Mailing Address:

6550 NORTH FEDERAL HWY.
STE. 240
FT. LAUDERDALE, FL 33308 US

New Mailing Address:

FEI Number: 65-0423067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANTOR, SAMUEL J
6700 BROKEN SOUND PARKWAY NW
STE 200
BOCA RATON, FL 33487 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: D () Delete
Name: BISTRICER, SIMONE
Address: 6550 N. FEDERAL HWY, SUITE 240
City-St-Zip: FT. LAUDERDALE, FL

Title: D () Delete
Name: BISTRICER, HERMAN
Address: 6550 N. FEDERAL HIGHWAY, SUITE 240
City-St-Zip: FORT LAUDERDALE, FL 33308

Title: VPS () Delete
Name: BLATT, ROBERT
Address: 6550 N. FEDERAL HIGHWAY, STE 240
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BISTRICER, SIMONE
Address: 6550 N. FEDERAL HWY, SUITE 240
City-St-Zip: FT. LAUDERDALE, FL 33308

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 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 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: ROBERT BLATT

VPS

03/22/2004

Electronic Signature of Signing Officer or Director

Date