


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 22, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P93000076969**

1. Entity Name  
**MIDLIFE REAL ESTATE INC.**



Principal Place of Business      Mailing Address

**19080 N.E. 29TH AVE.**      **19080 N.E. 29TH AVE.**  
**NORTH MIAMI BEACH, FL 33180**      **NORTH MIAMI BEACH, FL 33180**

**DO NOT WRITE IN THIS SPACE**



03152005    No Chg-P    CR2E034 (10/03)

4. FCI Number      Applied For  
**65-0464291**      Not Applicable

5. Certificate of Status Desired        **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**GENET, DAVID G**  
**19080 NE 29TH AVENUE**  
**N. MIAMI BEACH, FL 33180**

**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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and fee applicable      (NOTE: Registered Agent signature required when re-electing)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY ST ZIP	PD GENET, DAVID G 19080 N.W. 29TH AVE. NORTH MIAMI BEACH, FL 33180
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**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: \_\_\_\_\_ Date: **3/17/05**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Day, Month & Year