2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

Apr 18, 2008 08:00 A Secretary of State DOCUMENT # P99000019324 FIRST REALTY INTERNATIONAL, INC Mailing Address Principal Place of Business 2201 N COMMERCE PKWY 2201 N COMMERCE PKWY WESTON, FL 33326 WESTON, FL 33326 No Chg-P CR2E034 (11/05) 02112008 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3560541 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent CORREA, ALVARO DO NOT WRITE 2201 N COMMERCE PKWY WESTON, FL 33326 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, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. 05/01/08-80047-023 150.00 TITLE CORREA, ALVARO NAME 2201 N COMMERCE PKWY STREET ADDRESS CITY-ST-ZIP WESTON, FL 33326 **VPSD** TITLE CORREA, MARIA NAME 2201 N COMMERCE PKWY STREET ADDRESS WESTON, FL 33326 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling 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:

STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-11-08

FILED