

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State

04-30-2004 90217 030 ***150.00

DOCUMENT # P99000070267

1. Entity Name
SANTA MARIA REALTY, INC.



Principal Place of Business
**C/O ALLEN & GALEGO
601 BRICKELL KEY DR., SUITE 805
MIAMI, FL 33131**

Mailing Address
**C/O ALLEN & GALEGO
601 BRICKELL KEY DR., SUITE 805
MIAMI, FL 33131**

94073821



04232004 Chg-P CR2E034 (10/03)

2. Principal Place of Business
C/O ROBERT ALLEN LAW

Suite, Apt. #, etc.
1441 BRICKELL AVE., SUITE 1014

City & State
MIAMI, FL

Zip
33131

Country
U.S.

3. Mailing Address
C/O ROBERT ALLEN LAW

Suite, Apt. #, etc.
1441 BRICKELL AVE., SUITE 1014

City & State
MIAMI, FL

Zip
33131

Country
U.S.

4. FEI Number
65-1003585

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**ALLEN & GALEGO
601 BRICKELL KEY DRIVE
SUITE 805
MIAMI, FL 33131**

7. Name and Address of New Registered Agent

Name **ROBERT ALLEN LAW**

Street Address (P.O. Box Number is Not Acceptable)

1441 BRICKELL AVE., SUITE 1014

City **MIAMI**

FL

Zip Code **33131**

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

Signature, typed or printed name of registered agent and title if applicable.

By: Robert N. Allen, Jr., President

DATE

4/29/04

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 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
**PSD
DANIELS, RONA
601 BRICKELL KEY DR #805
MIAMI, FL 33131** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SS
ALLEN, ROBERT N JR
601 BRICKELL KEY DR #805
MIAMI, FL 33131** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PSD
DANIELS RONA
1441 BRICKELL AVE. SUITE 1014
MIAMI, FL 33131** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**SS
ALLEN, ROBERT N. JR.
1441 BRICKELL AVE. SUITE 1014
MIAMI, FL 33131** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert N. Allen, Jr.

Date

Daytime Phone #

4/29/04 305-372-3302