


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jul 07, 2005 08:00 AM**  
**Secretary of State**


**DOCUMENT # P03000156349**

1. Entity Name  
410 REAL ESTATE, INC.



Principal Place of Business 440 N.E. 1ST AVENUE HALLANDALE, FL 33009 US	Mailing Address 440 N.E. 1ST AVENUE HALLANDALE, FL 33009 US
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**DO NOT WRITE IN THIS SPACE**



07052005 No Chg-P CR2E034 (10/03)

4. FEI Number 20-0582224	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ATKINSON, III, WILSON C ESQ  
1946 TYLER STREET  
HOLLYWOOD, FL 33020

**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 title if applicable (NOTE: Registered Agent signature required when reinstating)

<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D.P GODBOUT, LAURIE 440 N.E. 1ST AVENUE HALLANDALE, FL 33009
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DSVP GORDON, SUSAN 440 N.E. 1ST AVENUE HALLANDALE, FL 33009
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07/07/05-80002-019 150.00

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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:** *Laurie Godbout* 7/5/05 9544578660  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #