

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90294 001 ***450.00

DOCUMENT # 651025

1. Entity Name
COMREAL MIAMI, INC.



Principal Place of Business
**8725 N.W. 18TH TERRACE, SUITE #105
DORAL, FL 33172**

Mailing Address
**8725 N.W. 18TH TERRACE, SUITE #105
DORAL, FL 33172**

00001647



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01292007

Chg-P

CR2E034 (12/06)

4. FEI Number

59-1955574

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SMITH, STEPHEN H
8725 N.W. 18TH TERRACE
SUITE 105
DORAL, FL 33172**

Name

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

City

FL

Zip Code

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.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD ☐ Delete
NAME SMITH, STEPHEN H
STREET ADDRESS 8725 N.W. 18TH TERRACE, #105
CITY-ST-ZIP DORAL, FL 33172

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

TITLE VP ☐ Delete
NAME HEINL, J L III
STREET ADDRESS 8725 NW 18 TER, #105
CITY-ST-ZIP DORAL, FL 33172

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

TITLE VP ☐ Delete
NAME REDLICH, EDWARD J
STREET ADDRESS 8725 NW 18TH TERRACE #105
CITY-ST-ZIP DORAL, FL 33172

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

TITLE V ☐ Delete
NAME MCHENRY, PHYLLIS S
STREET ADDRESS 8725 N.W. 18TH TERRACE #105
CITY-ST-ZIP DORAL, FL 33172

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

TITLE VP ☒ Delete
NAME NOBLE, DAVID A
STREET ADDRESS 8725 NW 18TH TERRACE #105
CITY-ST-ZIP DORAL, FL 33172

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

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

Stephen H. Smith
STEPHEN H. SMITH PRES

2/9/07 305-591-3044

Date

Daytime Phone #