2007 FOR PROFIT CORPORATION

FILED **ANNUAL REPORT** Mar 16, 2007 08:00 Al DOCUMENT # P93000076969 Secretary of State 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 No Chg-P CR2E034 (11/05) 02272007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0464291 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GENET, DAVID G DO NOT WRITE 19080 NE 29TH AVENUE N. MIAMI BEACH, FL 33180 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 U00000668457 03/27/07-80031-011 150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS MLE GENET, DAVID G NAME STREET ADDRESS 19080 N.W. 29TH AVE. CITY-ST-ZIP NORTH MIAMI BEACH, FL 33180 TITLE SAME STREET ADDRESS CTTY-ST-ZIP TILE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY - ST-ZIP शक ह NAME STREET ADDRESS CITY-ST-7P

th this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if s, with all other like empowered. I hereby certify that the informatindicated on this report or supplied. of the corporation or the received changed, or on an attachment

SIGNATURE:

TITLE NAME STREET ADDRESS CXTY-ST-ZIP

Daytime Phone #