2008 FOR PROFIT CORPORATION ANNUAL REPORT

Mar 31, 2008 08:00 A Secretary of State **DOCUMENT # P97000049664** 389 NW 1ST AVENUE REALTY CORP. Mailing Address Principal Place of Business 100 N.W. 4TH STREET 100 N.W. 4TH STREET BOCA RATON, FL 33432 BOCA RATON, FL 33432 CR2E034 (11/05) 03032008 No Chg-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0757989 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FLOOD, JOHN DO NOT WRITE 100 N.W. 4TH STREET BOCA RATON, FL 33432 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 . (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. U00000875092 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 04/11/08-80018-020 150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PS TITLE FLOOD, JOHN NAME 100 N.W. 4TH STREET STREET ADDRESS CITY-ST-ZIP BOCA RATON, FL 33432 VΡ TITLE ASHER, JEFF NAME STREET ADDRESS 100 N.W. 4TH STREET BOCA RATON, FL 33432 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-SI-ZIP

12. Thereby certify that the information supplied with his filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the Information indicated on this report or suppliemental leport 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 fusite 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

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

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED