

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90223 049 ***150.00

DOCUMENT # 210632 1. Entity Name REX THREE, INC.	
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Principal Place of Business 15431 SW 14TH STREET 15431 SW 14TH ST SUNRISE, FL 33326-1937 US	Mailing Address REX THREE, INC. 15431 SW 14TH ST SUNRISE, FL 33326-1937 US
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DO NOT WRITE IN THIS SPACE

60033426



03132006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-0859951	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 MILLER, STEPHEN H 15431 SW 14TH STREET SUNRISE, FL 33261

**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 _____
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, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MILLER, STEPHEN H 15431 S.W. 14TH ST. SUNRISE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C MILLER, JULIUS 15432 SW 14TH ST SUNRISE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SHUSTERMAN, HOWARD 15431 SW 14TH ST SUNRISE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFO/C.O.O GOLDSTEIN, MELVIN 15431 SW 14TH ST SUNRISE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MILLER, ELEANOR 15431 SW 14TH ST SUNRISE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V NASHER, BRUCE 15431 SW 14TH ST SUNRISE, FL

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IN THIS SPACE**

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: Neil Goldstein C.F.O. 4/17/06 954-452-8001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #