

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 260051

FILED
May 07, 2009
Secretary of State

Entity Name: ESQUIRE APARTMENTS, INC.

Current Principal Place of Business:

3525 POLK ST
APT 12
HOLLYWOOD, FL 33021 US

New Principal Place of Business:

3525 POLK ST
HOLLYWOOD, FL 33021 US

Current Mailing Address:

C/O STATE REALTY
5505 PENBROKE RD.
HOLLYWOOD, FL 33021 US

New Mailing Address:

C/O STATE REALTY
5505 PEMBROKE RD.
HOLLYWOOD, FL 33021 US

FEI Number: 59-1087994

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STATE REALTY
5505 PEMBROKE RD.
#11
HOLLYWOOD, FL 33021 US

Name and Address of New Registered Agent:

STATE REALTY
5505 PEMBROKE RD.
HOLLYWOOD, FL 33021 US

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.

SIGNATURE: ADAM STOUT

05/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: S () Delete
Name: ELO, SARINNO
Address: 3525 POLK ST #9
City-St-Zip: HOLLYWOOD, FL 33021

Title: T () Delete
Name: VISCOUNT, ROBERT S
Address: 3525 POLK ST #8
City-St-Zip: HOLLYWOOD, FL 33021

Title: P () Delete
Name: STOUT, ADAM
Address: 3525 POLK ST #11
City-St-Zip: HOLLYWOOD, FL 33021

Title: VP () Delete
Name: MURPHY, JOHN
Address: 3525 PARK #16
City-St-Zip: HOLLYWOOD, FL 33021

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T/S (X) Change () Addition
Name: ROBERT, REAGER
Address: 3525 POLK ST #8
City-St-Zip: HOLLYWOOD, FL 33021

Title: D (X) Change () Addition
Name: VISCOUNT, ROBERT S
Address: 3525 POLK ST #12
City-St-Zip: HOLLYWOOD, FL 33021

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: MURPHY, JOHN
Address: 3525 PARK #16
City-St-Zip: HOLLYWOOD, FL 33021

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADAM STOUT

P

05/07/2009

Electronic Signature of Signing Officer or Director

Date