## 2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

## FILED Jan 28, 2008 08:00 Al Secretary of State **DOCUMENT # 440347** 1. Entity Name TOLEDO REALTY, INC. Principal Place of Business Mailing Address 7175 SW 8TH ST. SUITE 201 A 7175 SW 8TH ST. SUITE 201 A MIAMI FL 33144 MIAMI FL 33144 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/07) City & State City & State 4. FEI Number Applied For 59-1498169 Not Applicable Zιρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Bequired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DAIRE, ALBERTO Street Address (P.O. Box Number is Not Acceptable) 251 TAMIAMI CANAL RD. **MIAMI FL 33144** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or coth, in the State of Florida. Familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or chiefed harry of registred opent and title. I hopticable. /KOTE: Registiried Agorit eignature required when reinstitut gi DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee Will Be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PD □ Derete TITLE Channe milibba 🛄 NAME DAIRE, ALBERTO NAME 251 TAMIAMI CANAL RD STREET AODRESS STREET ADDRESS CITY-ST-ZiP MIAMI, FL 00000 City-St-ZiP TITLE ☐ De-ete TITLE ☐ Change Addition NAME HAME STREET ADDRESS STREET ADDRESS CHY-SI-7P CITY-ST-ZIP U00000798809 TILL Derete Change HILL Addition 01/30/08-80044-007 150.00 NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP CHY-ST-ZIP ☐ De ete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-SI-ZIE ☐ De ele HILL Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS COTY-ST-7/P CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-7/P

12. Thereby certify that the information subclied with this filing does not qualify for the exemptions contained in Seution 119, Florida Statutes. I further certify that the information indicated on this report of 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 efficer 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.

ALBENTO DAINE

1-25-08 (3N)214-4040