

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 16, 2007 08:00 A
Secretary of State

DOCUMENT # 641555

1. Entity Name
AFRC REALTY CORP.



Principal Place of Business
**18400 W. DIXIE HWY., SUITE #D
N. MIAMI BEACH, FL 33160**

Mailing Address
**18400 W. DIXIE HWY., SUITE #D
N. MIAMI BEACH, FL 33160**



DO NOT WRITE IN THIS SPACE

04112007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2044171

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LANE, PAUL J
18400 W DIXIE HWY, SUITE D
N MIAMI BCH, FL 33160**

**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, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**000000708148
04/24/07-80102-014 150.00**

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SHIDLOWSKY, HOWARD
STREET ADDRESS	18400 W. DIXIE HIGHWAY., SUITE D
CITY-ST-ZIP	N MIAMI BEACH, FL 33160
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
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:

SIGNATURE TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HOWARD SHIDLOWSKY

4/11/07

Daytime Phone #

305-935-6533