

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

07 AUG 22 AM 4:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 654781

1. Entity Name
FORTUNE INTERNATIONAL REALTY, INC.



Principal Place of Business
2666 BRICKELL AVE. 3RD FLOOR
MIAMI, FL 33129

Mailing Address
2666 BRICKELL AVE. 3RD FLOOR
MIAMI, FL 33129



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

State, Apt. #, etc.

State, Apt. #, etc.

07162007 Chg-P CR2E034 (12/06)

City & State

City & State

4. FEI Number
59-1978907

Applied For
Not Application

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

DEFORTUNA, EDGARDO
2666 BRICKELL AVE
3 FLOOR
MIAMI, FL 33129

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 in full on this document, and this is approved

(NOTE: Registered Agent Signature Not Required for Filing)

Date

Amended AR is \$61.25

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P
NAME DEFORTUNA, EDGARDO
STREET ADDRESS 2666 BRICKELL AVE 3 FLOOR
CITY-STATE-ZIP MIAMI, FL ☐ Delete

TITLE S
NAME Harriet K. Martin
STREET ADDRESS 2666 Brickell Avenue, 3rd Floor
CITY-STATE-ZIP Miami, FL 33129 ☐ Change ☒ Addition

TITLE V
NAME RUIZ, OLIVER
STREET ADDRESS 2666 BRICKELL AVENUE
CITY-STATE-ZIP MIAMI, FL 33129 ☐ Delete

TITLE S
NAME Van R. Martin
STREET ADDRESS 2666 Brickell Avenue, 3rd Floor
CITY-STATE-ZIP Miami, FL 33129 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE S
NAME Susan M. Davis
STREET ADDRESS 2666 Brickell Avenue, 3rd Floor
CITY-STATE-ZIP Miami, FL 33129 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP ☐ Change ☐ Addition

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 is empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 as changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Edgardo Defortuna

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/07 305-851-2600