


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2008 8:00 am
Secretary of State

03-17-2008 90019 044 ***150.00

DOCUMENT # 676297 1. Entity Name GROUP III REALTY, INC.			
Principal Place of Business 2035 HARDING ST. SUITE 200 HOLLYWOOD, FL 33020-2797 US		Mailing Address 2035 HARDING ST. SUITE 200 HOLLYWOOD, FL 33020-2797 US	
2. Principal Place of Business - No P.O. Box # 2035 Harding Street Suite, Apt. #, etc. Suite 100 City & State Hollywood, FL Zip 33020 Country Broward		3. Mailing Address 2035 Harding Street Suite, Apt. #, etc. Suite 100 City & State Hollywood, FL Zip 33020 Country Broward	
4. FEI Number 59-2012548		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MEYER, BERNARD S. 2035 HARDING STREET HOLLYWOOD, FL 33020		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE PD NAME MEYER, BERNARD S. STREET ADDRESS 2035 HARDING ST STE 200 CITY-ST-ZIP HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete	TITLE PD NAME Meyer, Bernard S. STREET ADDRESS 2035 Harding Street, Suite 100 CITY-ST-ZIP Hollywood, FL 33020	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE STD NAME MEYROWITZ, ANDREW STREET ADDRESS 2035 HARDING ST STE 200 CITY-ST-ZIP HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete	TITLE STD NAME Meyrowitz, Andrew STREET ADDRESS 2035 Harding Street, Suite 100 CITY-ST-ZIP Hollywood, FL 33020	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE D NAME KURZMAN, RICHARD STREET ADDRESS 2035 HARDING ST STE 200 CITY-ST-ZIP HOLLYWOOD, FL 33020	<input type="checkbox"/> Delete	TITLE D NAME Kurzman, Richard STREET ADDRESS 2035 Harding Street, Suite 100 CITY-ST-ZIP Hollywood, FL 33020	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 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: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>3/14/08</u> Daytime Phone # _____	