## 2008 FOR PROFIT CORPORATION

## FILED Jan 07, 2008 08:00 AN **ANNUAL REPORT** Secretary of State DOCUMENT # F66173 PRIME REALTY ADVISORS, INC. Mailing Address Principal Place of Business 1501 RJ CONLAN BLVD #250 1501 RI CONLAN BLVD #250 SUITE 250 PALM BAY, FL 32905 US PALM BAY, FL 32905 US 01032008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2164877 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DEVER, DONALD B. DO NOT WRITE 151 SEÁGLASS DR MELBOURNE BEACH, FL 32591 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, typed or printed trains of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating PIAG 9. Election Campaign Financing **\$5.00** May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. PSD TITLE DEVER, DONALD B STREET ADDRESS 1501 CONLAN BLVD U00000774232 01/07/08-80006-015 150.00 PALM BAY, FL 32905 CITY-ST-ZIP TITLE VP RUIZ, RAMON NAME 1501 R.J. CONLAN SUITE 250 STREET ADDRESS PALM BAY, FL 32905 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP DILE NAME STREET ADDRESS

12. Thereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119. Florida Statutes 1 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 in changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP --

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DONALD B. DOVER, PRUSINON