2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # F94000005802

1. Entity Name
R. A. REAL ESTATE, INC.

Principal Place of Business	Mailing Address
823 11TH AVE NEW YORK, NY 10019	823 11TH AVE NEW YORK, NY 10019

DO NOT WRITE IN THIS SPACE

03182008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
13-3107404	Not Applicable

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

6. Name and Address of Current Registered Agent

GALDOVIN SARAGA & LIPSHV
201 NE FIRST AVE
DELRAY BEACH, FL 33444

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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, 2008 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	000000169(845 04/23/08-80042-012 150.00

10.   OFFICERS AND DIRECTORS

TITLE	CP
NAME	CATSIMATIDIS, JOHN A
STREET ADDRESS	823 11TH AVE
CITY-ST-ZIP	NEW YORK, NY 10019

TITLE	S
NAME	PALERMO, LOUIS P
STREET ADDRESS	823 ELEVENTH AVE
CITY-ST-ZIP	NEW YORK, NY 10019

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: X _____   JOHN CATSIMATIDIS   04/01/08
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #