


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 08:00 AM
Secretary of State

DOCUMENT # G42533 1. Entity Name CERVERA REAL ESTATE, INC.	
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Principal Place of Business 1492 S. MIAMI AVE MIAMI, FL 33130 US	Mailing Address 1492 S. MIAMI AVE MIAMI, FL 33130 US
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04182006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-2307606	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

**GOLDSTEIN, RICHARD M.
2 S BISCAYNE BLVD
STE 3250
MIAMI, FL 33131**

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 _____ (NOTE: Registered Agent signature required when reinstating)

Signature, typed or printed name of registered agent and title if applicable

U00000520252
05/02/06-80051-008 150.00

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CERVERA, ALICIA 1236 ANASTASIA AVE. CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV CERVERA, JAVIER 1236 ANASTASIA AVE. CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS CERVERA, VERONICA 3700 ALHAMBRA CT CORAL GABLES, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT CERVERA, ALICIA E. 5510 RIVIERA DRIVE CORAL GABLES, FL
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:  **ALICIA CERVERA - PRESIDENT** **4-18-06** **305 374 3434**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #