

FILED
Apr 26, 2004 8:00 am
Secretary of State

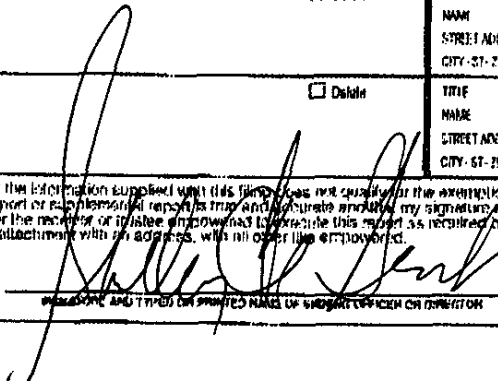
04-26-2004 90548 046 ***150.00

**2004 FOR PROFIT CORPORATION
 ANNUAL REPORT**

54040005



04212004 Chg-P CR2E034 (10/03)

DOCUMENT # H11477			
1. Entity Name CHARLOTTE SHARKEY REAL ESTATE, INC.			
Principal Place of Business 2460 METROCENTRE DR. WEST PALM BEACH, FL 33407		Mailing Address 2460 METROCENTRE DR. WEST PALM BEACH, FL 33407	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 59-2428108		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$9.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GERST, SHELLEY FIXLER 2460 METROCENTRE DR. WEST PALM BEACH, FL 33407		7. Name and Address of New Registered Agent 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 name of registered agent and title if applicable (NOTE: Registered Agent signature required when substituting) DATE _____			
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00		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 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST GERST, SHELLEY FIXLER 2460 METROCENTRE BLVD. WEST PALM BEACH, FL 33407 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(f), 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 employment.			
SIGNATURE: 		Date: 4-21-04 56-6404199	
PRINTED AND TYPED OR PRINTED NAME OF SIGNATURE OFFICER OR DIRECTOR			