

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 22, 2007 8:00 am
Secretary of State

02-22-2007 90025 026 ***150.00

DOCUMENT # H23153

1. Entity Name

CALANDRA REALTY, INC.



Principal Place of Business

% SALVATORE CALANDRA
1220 SOUTH FEDERAL HIGHWAY
DANIA FL 33004

Mailing Address

% SALVATORE CALANDRA
1220 SOUTH FEDERAL HIGHWAY
DANIA FL 33004



2. Principal Place of Business - No P.O. Box #

120 E. OAKLAND PARK

Suite, Apt. #, etc.

BLVD

SUITE 105

City & State

WILTON MANORS FL

Zip

33334

Country

BROWARD

3. Mailing Address

9462 BARITONE CT

Suite, Apt. #, etc.

City & State

BOCA RATON, FLORIDA

Zip

33496

Country

PALM BEACH

1st MOORE

CR2E034 (10/06)

4. FEI Number

59-2449545

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

CALANDRA, SALVATORE
1220 SOUTH FEDERAL HIGHWAY
DANIA FL 33004

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 re-registering.)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2007 Fee Will Be \$550.00

Make Check Payable to Florida Department of State

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
PD
CALANDRA, SALVATORE
9462 BARITONE CT
BOCA RATON FL 33496 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Delete

TITLE
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CITY ST ZIP ☐ Delete

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STREET ADDRESS
CITY ST ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY ST ZIP ☐ Change ☐ Addition

TITLE
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CITY ST ZIP ☐ Change ☐ Addition

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NAME
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CITY ST ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Salvatore Calandra

Feb 19, 2007 (561) 482-0029