## **2006 FOR PROFIT CORPORATION ANNUAL REPORT**

## Mar 23, 2006 8:00 am Secretary of State DOCUMENT #J05322 03-23-2006 90015 032 \*\*\*150.00 INTERNATIONAL PROJECT REALTY CORPORATION Principal Place of Business Mailing Address **677 NORTH WASHINGTON BL** 20004843 PO BOX 2700 SARASOTA, FL 34238 US SARASOTA, FL 34230 US 2. Principal Place of Business 3. Mailing Address 2841 GTH STREET 4928 BRIDGEHAMPTONEW Suite, Apt. #, etc. Suite, Apt. #, etc. 03212006 Chg-P CR2E034 (11/05) SARASOTA City & State City & State 4. FEI Number Applied For SARASOTA 59-2681305 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired 34237 USA 34238 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WEINBERG ALEXANDER WEINBERG, ALEXANDER Street Address (P.O. Box Number is Not Acceptable) 8454 S TAMIAMI TRAIL SARASOTA, FL 34238 SARASOTA 34237 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. Haracala 3/21/06 Signature, typed or printed name of registered agent and title if applic (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TOTLE ☐ Change Addition WEINBERG, ALEXANDER NAME NAME STREET ADDRESS 4928 BRIDGE HAMPTON BLVD STREET ADDRESS CITY-ST-ZIP SARASOTA, FL CITY-ST-7IP TITLE ☐ Delete TITLE Change | ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CJTY-ST-7IP ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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. Offeración Herobar SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR (941) 926-7160 SIGNATURE:

FILED