


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 19, 2005 8:00 am
Secretary of State

05-19-2005 90047 011 ***558.75

DOCUMENT # J42308
 1. Entity Name
 UNITED INTERNATIONAL REALTY, INC.



Principal Place of Business
 12421 N. FLORIDA AVE. SUITE C-220
 TAMPA, FL 33612

Mailing Address
 12421 N. FLORIDA AVE. SUITE C-220
 TAMPA, FL 33612

50052940



2. Principal Place of Business
 3550 Buschwood
 Suite, Apt. #, etc. PARK DR. STE 245

3. Mailing Address
 PO Box 82189
 Suite, Apt. #, etc. _____

05172005 Chg-P CR2E034 (10/03)

City & State
 Tampa Fla

City & State
 Tampa Florida

Zip
 33618

Country
 USA

Zip
 33682

Country
 USA

4. FEI Number
 59-2762827

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 HAY, KEN
 12421 N FLORIDA AVE
 TAMPA, FL 33612

7. Name and Address of New Registered Agent
 Name Ken Hay
 Street Address (P.O. Box Number is Not Acceptable)
3550 Buschwood Park Dr.
Suite 245
 City Tampa FL Zip Code 33618

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 Ken Hay DATE 5/1/05
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$550.00
Due by September 7, 2005

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 HAY, KENNETH W. 12421 N. FL. AVE. C-220 TAMPA, FL	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	Ken Hay 3550 Buschwood Park Dr Tampa FL 33618	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Ken Hay DATE 5/1/05 DAYTIME PHONE # 813-935-8361
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR