## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

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

DOCUMENT # J42308  1. Entity Name UNITED INTERNATIONAL REALTY, INC.					05-19-2005 90047 011 ***558.75				
Principal Plac	e of Business						•		
12421 N. FLORIDA AVE. SUITE C-220 12421 N. FLORIDA AVE. S TAMPA, FL 33612 TAMPA, FL 33612			SUITE C-220				<b>3 500</b>	152941	)
							A EUSTA 11914 EUST		
2. Principal Place of Business 3. Mailing Address 3550 Buschwood Po Box			8218	9					
Suite, Apt. #, etc. PANK Dr. Suite, Apt. #, et					05172005	Chg-P	CR2E0	34 (10/03)	
City & Stat	e _/	City & State	El.	200	4. FEI Numbe			<u> </u>	olied For
334		Zip	Country	200	59-2762		ta (	\$8.75 Addit	Applicable
334	18 US17	33682	<u>451</u>	<del>-/</del>		of Status Desired	ر ک	Fee Required	
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name									
HAY, KEN		Charat A	Ken		74				
1 <del>2421 N FLORIDA AVE-</del> _TAMPA, FL-33612						r is Not Acceptable S <i>Ch (200</i>	<u>"0 P</u>	mrlL.	Da
				SU;	te_	245			
			City	Ām	20		FL	Zip Code	18
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. Lam familiar with and accent									and accept
the obligations of registered agent.									
SIGNATURE.	Simulation		<del> </del>		5/1	103	5		
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  OATE									
FILE NOWI!! FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Due by September 7, 2005 Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	<del></del>	11.		ADDITIONS/	CHANGES TO OFF	ICERS AND	DIRECTORS	IN 11
TITLE	PD HAY, KENNETH W.	☐ Delete	TITLE NAME	Ne	n Ha	a	,	Change	☐ Addition
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indicated of the cor changed,	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee emplo or on an attachment with an address, i	this filing does not qualify for the true and accurate and that my owered to execute this report as with all other like empowered.	he exemption stat r signature shall his s required by Cha	ed in Secti ave the sar opter 607, P	ion 119.07(3)(i) me legal effect Florida Statutes	i, Florida Statutes, t as if made under o ; and that my name	l further certi bath; that I ar e appears in	ify that the info m an officer of Block 10 or I	ormation or director Block 11 if

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: