

# **2010 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# K21103

**FILED**  
**Apr 22, 2010**  
**Secretary of State**

**Entity Name:** PONTES & ASSOCIATES REALTY, INC.

**Current Principal Place of Business:**

% CHERIE DONNETTA PONTES  
6080 SW 79 STREET  
MIAMI, FL 33143

**New Principal Place of Business:**

C/O CHERIE DONNETTA PONTES  
6080 SW 79 STREET  
MIAMI, FL 33143

**Current Mailing Address:**

C/O CHERIE DONNETTA PONTES  
P.O. BOX 831898  
MIAMI, FL 33283

**New Mailing Address:**

**FEI Number:** 65-0044835

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CHERIE, PONTES D PRES.  
6080 SW 79 STREET  
MIAMI, FL 33143 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: D  
Name: PONTES, CHERIE D  
Address: P.O. BOX 831898  
City-St-Zip: MIAMI, FL 33283 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CHERIE PONTES

D

04/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date