FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Feb 01, 2008 08:00 AN Secretary of State **DOCUMENT # K31126** GANDELMAN REALTY CORPORATION Principal Place of Business Mailing Address 1111 KANE CONCOURSE 8887 COLLINS AVE SUITE 502B #1006 BAY HARBOUR, FL 33154 SURFSIDE, FL 33154 01142008 No Chg-P CR2E034 (11/05) 4. FEI Number Applied For 65-0107808 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GANDELMAN, HILDA 8877 COLLING AVENUE **APT 1006** SURFSIDE, FL 33154 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, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signeture required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOWIII FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. TITLE GANDELMAN, HILDA NAME STREET ADDRESS 8877 COLLINS AVENUE #1006 02/08/08-80068-010 150.00 CITY-ST-ZIP MIAMI BEACH, FL 33154 TITLE NAME STREET ANDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE

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.

NAME STREET ADDRESS CITY-ST-ZIP