2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K39145

Title:

Name:

Address: City-St-Zip: VD

() Delete

GRAY, CATHERINE LANE,

860 MAPLETON TERRACE

JACKSONVILLE, FL 32207

FILED Apr 15, 2008 Secretary of State

Entity Nan	ne: BREC REA	LTY CORPORATION				
Current Pr	incipal Place o	f Business:	New Princ	New Principal Place of Business:		
8202 S.W. MIAMI, FL						
Current Ma	ailing Address	:	New Maili	New Mailing Address:		
860 MAPLETON TERRACE MIAMI, FL 32207				860 MAPLETON TERRACE JACKSONVILLE, FL 32207		
FEI Number:	65-0080742	FEI Number Applied For ()	FEI Number Not Appl	icable ()	Certificate of Status Desired	d ()
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
LANE, ELIZ 8202 S.W. MIAMI, FL	82 COURT 33143 US	bmits this statement for the p	ourpose of changing i	ts reaistered	office or registered agent.	or both.
in the State	of Florida.		ourpood of officinging f	io regioterea	emee or regiotered agent,	01 2011,
SIGNATUR						
	Electronic	Signature of Registered Age	ent	Date		
Election Can	npaign Financing 1	rust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	VSD () D LANE, ROBERT C 9721 SW 72 COU MIAMI, FL 33156	CUSHMAN, IRT	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: Citv-St-Zip:	PTD () D LANE, ELIZABETH 8202 SW 82 COU MIAML FL 33143	HANNE, IRT	Title: Name: Address: Citv-St-Zip:	PTD (LANE, ELIZAI 8202 SW 824 MIAML FL 33	COURT	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

Title:

Name:

Address:

City-St-Zip:

VD

GRAY, CATHERINE L

860 MAPLETON TERRACE

JACKSONVILLE, FL 32207

(X) Change () Addition

SIGNATURE: CATHERINE L GRAY V/D 04/15/2008