2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # K72617

1. Entity Name

1ST ÁMERICAN REALTY NETWORK, INC.



Principal Place of Business

6741-COPAL-WAY 1301 Lisbon St.

SUITE #20 Coral Gables, FL:

WIAMI, FL 33155 US. 33134-2223

Mailing Address
-6741 CORAL WAY - POBOX 14/367
-SUITE #20 Coral GABIES, FL .
-MIAMI, FL 33155 US - 33/14 - 1367

FILED Apr 13, 2006 8:00 am Secretary of State

04-13-2006 90287 015 ***150.00

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DO NOT WRITE IN THIS SPACE

No Chg-P

CR2E034 (11/05)

4.	FEI Number
	65-0108143

Applied For Not Applicable

Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PEREZ, EDDY J. 6741-GORAL-WAY SUITE-#20

MIAMI: PL 33155

Perez, Eddy J. (same) 1301 Lisbon St. Coral Gables, FL 33134

- change of address only -

DO	N	OT	WR	ITE
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- Monty - of the conty	
The above named entity submits this statement for the purpose of changing its registered agent.	stered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed out made after a fregistered agent and title if epiplicable (NOTE: Reg	Hosi dout 3/30/06 Island Agent signature required when reinslating) DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign F Trust Fund Contribut	
10. OFFICERS AND DIRECTORS	
TITLE D -> PEREZ, Eddy I	
NAME PEREZ, EDDY J.	
CITY-ST-ZIP MIAMILE POSTS Coral Gables, FL 33134.2	112
	<u>^^7</u>
TITLE NAME	
STREET ADDRESS	
CITY-SI-ZIP	
TITLE	
NAME	
STREET ADDRESS	DO NOT WRITE
CITY-ST-ZIP	DO MANIE
TITLE	IN THIS SPACE
NAME	114 .11.00 (3) / 100 (6)
STREET ADDRESS CITY-ST-ZIP	
TITLE NAME	
STREET AODRESS	
CITY-SI-ZIP	
TITLE	
NAME	

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.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

3/30/06

(305) 26V-22> 4-02