

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L56973

FILED  
Feb 07, 2009  
Secretary of State

**Entity Name:** KIRSCHNER REALTY INTERNATIONAL, INC.

**Current Principal Place of Business:**

2005 VAN BUREN ST.  
HOLLYWOOD, FL 33020 US

**New Principal Place of Business:**

**Current Mailing Address:**

2005 VAN BUREN ST.  
HOLLYWOOD, FL 33020 US

**New Mailing Address:**

**FEI Number:** 65-0188150

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KIRSCHNER, KIMBERLY  
2005 VAN BUREN STREET  
HOLLYWOOD, FL 33020 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: DP ( ) Delete  
Name: KIRSCHNER, KIMBERLY A  
Address: 17050 N BAY ROAD #309  
City-St-Zip: SUNNY ISLES BEACH, FL 33160

Title: VD ( ) Delete  
Name: KIRSCHNER, GREGORY S  
Address: 1241 TAYLOR ST.  
City-St-Zip: HOLLYWOOD, FL 33019

Title: DV ( ) Delete  
Name: KIRSCHNER, HENRY D  
Address: 2005 VAN BUREN STREET  
City-St-Zip: HOLLYWOOD, FL 33020

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DV (X) Change ( ) Addition  
Name: KIRSCHNER, HENRY D  
Address: 1446 STICKLEY AVE  
City-St-Zip: CELEBRATION, FL 34747

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.

**SIGNATURE:** HENRY D. KIRSCHNER

VP

02/07/2009

Electronic Signature of Signing Officer or Director

Date