## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 06, 2005 08:00 AM Secretary of State

ANNUAL·REPORT			Apr 00, 2005 00:00		
DOCUMENT # L62054  1. Entity Name JULIE REALTY OF FLORIDA, INC.				- Se	cretary of Stat
3107 STIRLING RD STE 201	failing Address 3107 STIRLING RD STE 201 FORT LAUDERDALE, FL 33312	. US			######################################
DO NOT WRITE II		CE	03292005 4. FEI Number 65-0189	No Chg-P	CR2E034 (10/03)  Applied For Not Applicable  \$8.75 Additional Fee Required
6. Name and Address of Current Register PIOTRKOWSKI, JOEL S. 3107 STIRLING RD STE 201 MIAMI BEACH, FL 33141	stered Agent			NOT WI	
The above named entity submits this statement for the the obligations of registered agent.  SIGNATURE		·		, in the Stale of Flor	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution,		.00 May Be ed to Fees		DATE
10. OFFICERS AND DIRE  ITTLE PD  NAME FREEDMAN, JULIE  STREET ADDRESS 3107 STIRLING RD STE 201  OITY-ST-ZIP FORT LAUDERDALE, FL 33312  ITTLE VP  NAME REITER, ISAAC  STREET ADDRESS 3107 STIRLING RD STE 201  CITY ST-ZIP FORT LAUDERDALE, FL 33312	ctors		-	U0000 04/06/03	00289292 5-80021-808 150.80
THE NAME STREET ADDRESS CITY-ST-ZIP HITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP		DO NOT WRITE IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		~			-

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 path; 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.

STREET ADDRESS CITY+ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/04 954-454 4871 Daysina Prane v