


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jun 24, 2005 8:00 am**  
**Secretary of State**

06-13-2005 90001 050 \*\*\*158.75

**DOCUMENT # M56990**  
 1. Entity Name  
 SYBIL TODD REALTY, INC.



Principal Place of Business 18800 NW 2ND AVE SUITE 111 MIAMI, FL 33169 US	Mailing Address 18800 NW 2ND AVE SUITE 111 MIAMI, FL 33169 US
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**66023740**



06022005 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2841255	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent  
 TODD, SYBIL V.  
 18800 N.W. 2ND AVE.  
 SUITE 111  
 MIAMI, FL 33169

**DO NOT WRITE IN THIS SPACE**

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 *Sybil V. Todd* SYBIL V. TODD 06-10-05  
Signature, type or printed name of registered agent and use if applicable (NOTE: Registered Agent signature required when reissuing) DATE

**FILE NOW!!! FEE IS \$150.00**  
**Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D TODD, SYBIL V. 18800 NW 2ND AVE SUITE 111 MIAMI, FL 33169
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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**DO NOT WRITE IN THIS SPACE**

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 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: *Sybil V. Todd* SYBIL V. TODD 05 06/10/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT  
Sybil Todd Realty, Inc.



66023740

June 21, 2005

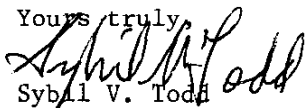
Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

Reference Number M56990

I acknowledge receipt of your letter dated 6/14/05 and wish to advise that I did not receive any notice of Annual Renewal so I down-loaded the form on the internet and checked off the section that says that if I did not receive the card I would not have to pay the penalty and so I am asking that you please abate the penalty.

Enclosed please find form duly signed.

Yours truly,

  
Sybil V. Todd

Encl.