

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P00000017513

1. Entity Name
REAL ESTATE INVESTMENT PLUS CORPORATION



Principal Place of Business
3025 INDIAN CREEK DR
APT 109
MIAMI BEACH, FL 33140

Mailing Address
3025 INDIAN CREEK DR
109
MIAMI BEACH, FL 33140

FILED

04 JUN -8 AM 11:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



06072004 No Chg-P CR2E034 (10/03) JU

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0985454

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

RODRIGUEZ, ILIA
3101 INDIAN CREEK DRIVE
UNIT 300
MIAMI BEACH, FL 33140

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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

Ilia Rodriguez

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
Due by September 8, 2004

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
PVD
RODRIGUEZ, ILIA
3025 INDIAN CREEK DRIVE, SUITE 109
MIAMI BEACH, FL 33140

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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TITLE
NAME
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CITY - ST - ZIP

500038198495
06/23/04--01067--012 **150.00

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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:

Ilia Rodriguez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #