


**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jul 09, 2004 8:00 am**  
**Secretary of State**

07-09-2004 90001 046 \*\*\*150.00

<b>DOCUMENT # P00000071386</b> 1. Entity Name SFD REALTY, INC.	
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Principal Place of Business C/O CHARLES R. ABELE 2901 SW 8TH STREET, SUITE 204 MIAMI, FL 33135	Mailing Address C/O CHARLES R. ABELE 2901 SW 8TH STREET, SUITE 204 MIAMI, FL 33135
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**54060705**



06302004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>65-1031498</b>	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
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**6. Name and Address of Current Registered Agent**

BOSCHETTI, JOSE R 2901 SW 8TH STREET SUITE 204 MIAMI, FL 33135
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**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  (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00**  
**Due by September 8, 2004**

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

**10. OFFICERS AND DIRECTORS**

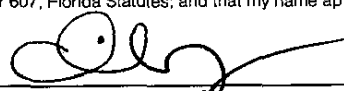
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ABELE, CHARLES R JR. 2901 S.W 8 STREET SUITE 204 MIAMI, FL 33135
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**DO NOT WRITE  
IN THIS SPACE**

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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



Date

Daytime Phone #



**Southern  
FACILITIES**  
DEVELOPMENT, INC.

2901 S.W. 8<sup>th</sup> Street  
Suite #204  
Miami, FL 33135  
Tel 305 541.3738  
Fax 305 541.1314

*Attachment*

57060705-

June 30, 2004

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: SFD Realty Inc.  
Document number: P00000071386

Dear Sir or Madam:

This will confirm the telephone conversation with your office wherein you agreed to waive the penalty fee for the annual report due to the fact that we never received the notice for renewal. Enclosed please find the annual report along with a check in the sum of \$150.00.

Thank you for your attention to this matter.

Sincerely,

  
Charles R. Abele