2004 FOR PROFIT CORPORATION ANNUAL REPORT DOCUMENT # P00000079536 1. Entity Name REALTY GRAND CENTRAL, INC. Principal Place of Business Mailing Address

FILED May 03, 2004 8:00 am Secretary of State

05-03-2004 91019 012 ***150.00

18520 NW 67TH AVE. #106 1		18520 NW 67TH AVE. #106 MIAMI, FL 33015					
DO NOT WRITE IN THIS SP				04242004 No Chg-P		CR2E034 (10/03)	
			UE .	4. FEI Number NOT APPLICABLE 5. Certificate of Status Desired		Applied For Not Applicable \$8.75 Additional Fee Required	
	6. Name and Address of Current Regi I, MARLENE T 67TH AVE. #106 33015	DO NOT WRITE IN THIS SPACE					
the obligati	named entity submits this statement for the ions of registered agent.	purpose of changing its register	ed office or registe	red agent, or both	, in the State of Flo	rida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered egent and title	if applicable. (NOTE: Registere	d Agent signature require	d when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Finant Trust Fund Contribution.			- ,	.00 May Be ted to Fees			
10.	OFFICERS AND DIRE	CTORS					
TITLE Name Street address City-St-Zip	D MOREJON, MARLENE T 18520 NW 67TH AVE. #106 MIAMI, FL 33015	· .					
TITLE Name Street address City-St-Zip							
TITLE Name Street address City-St-Zip		, ¥		DO	NOT W	RITE	
TITLE Name Street Address City-SI-ZIP				IN T	HIS SF	PACE	
TITLE Name Street Address City-St-Zip							
TITLE NAME STREET ADDRESS CITY-SI-ZIP	certify that the information supplied with this					, mage	

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:	Warley Thomas Marlen T STORBETTOR DATE OF DIRECTOR	margan	04/24/04	(15)624-8614
	STONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	J	Date	Daytime Phone #