

# 2004 AR

**PROFIT  
CORPORATION  
ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**

04 MAY 28 PM 12:06

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # P01000029034**  
1. Corporation Name

**DIRECT REAL ESTATE INVESTMENTS, INC.**

Principal Place of Business  
10470 SW 47 St  
Miami, Fl. 33165

Mailing Address  
10470 SW 47 St  
Miami, Fl. 33165

*MRS*

3. Date Incorporated or Qualified <b>03/21/2001</b>	3a. Date of Last Report
4. FEI Number <b>65-1108894</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 <b>9609 NW 12 St.</b>	26 <b>P.O. Box 226738</b>
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22 <b>Suite B</b>	27
City & State	City & State
23 <b>Miami, Fl</b>	28 <b>Miami, Fl</b>
Zip	Zip
24 <b>33172</b>	29 <b>33122</b>
Country	Country
25 <b>USA</b>	30 <b>USA</b>

9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
Usman Riaz 10470 SW 47 St Miami, Fl. 33165		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable) <b>9609 NW 12 St</b>	
		83 <b>Suite B</b>	
		84 City <b>Miami</b>	
		85 Zip Code <b>FL 33172</b>	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *[Signature]* **Usman Riaz** DATE **5/26/04**  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	11 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		12 NAME	
STREET ADDRESS		13 STREET ADDRESS	<b>9609 NW 12 St Suite B</b>
CITY - ST - ZIP		14 CITY - ST - ZIP	<b>Miami, Fl. 33172</b>
TITLE	<input type="checkbox"/> DELETE	21 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		22 NAME	
STREET ADDRESS		23 STREET ADDRESS	<b>9609 NW 12 St Suite B</b>
CITY - ST - ZIP		24 CITY - ST - ZIP	<b>Miami, Fl. 33172</b>
TITLE	<input type="checkbox"/> DELETE	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		32 NAME	
STREET ADDRESS		33 STREET ADDRESS	<b>600037724846</b>
CITY - ST - ZIP		34 CITY - ST - ZIP	<b>06/07/04--01051--017 **150.00</b>
TITLE	<input type="checkbox"/> DELETE	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		42 NAME	
STREET ADDRESS		43 STREET ADDRESS	
CITY - ST - ZIP		44 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY - ST - ZIP		54 CITY - ST - ZIP	
TITLE	<input type="checkbox"/> DELETE	61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY - ST - ZIP		64 CITY - ST - ZIP	

14. I do 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* **Khalid Riaz** DATE **5/26/04**

DIRECT REAL ESTATE INVESTMENTS, INC.  
9609 NW 12 STREET, SUITE B  
MIAMI, FLORIDA 33172

Miami, May 26, 2004

Division of Corporation  
Uniform Business Report  
P.O. Box 1500  
Tallahassee, FL 32302-1500

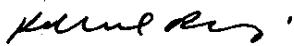
Dear Sir:

This letter is to inform you that we never received the original form to be file before May 1<sup>st</sup>, 2004, because during year 2004 we were traveling in and out of Miami for business purposes, and must of our correspondence were lost in the mail. I will appreciate very much if you received and accept our check in the amount of \$ 150.00 as payment of the Corporation Uniform Business Report for year 2004.

As you can see we move our office to: 9609 NW 12 Street, Suite B, Miami, FL 33172.

I appreciate your help to resolve this matter.

Sincerely your:



Khalid Riaz  
President