2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT # P01000030730**

Entity Name

AMERICA EAST REALTY, INC.



FILED Feb 23, 2007 08:00 Al Secretary of State

Principal Place of Business

1900 S. HARBOR CITY BOULEVARD

SUITE 328

MELBOURNE, FL 32901

Mailing Address

1900 S. HARBOR CITY BOULEVARD

**SUITE 328** 

MELBOURNE, FL 32901



01032007

No Chg-P

CR2E034 (11/05)

4. FEI Number

59-3707595

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

NICHOLS, JAMES B 1900 S. HARBOR CITY BOULEVARD SUITE 328 MELBOURNE, FL 32901

## DO NOT WRITE IN THIS SPACE

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	named entity submits this statement for the pions of registered agent.	urpose of changing its registered office of	r registered agent, or bo	oth, in the State of Florida. I am fami	liar with, and accept	
SIGNATURE Signature, typed of printed name of registered agent and title if applicable (NOTE: Registered			Agent eignsture required when reinstating) DATE			
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	S. Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS NICHOLS, JAMES B 1900 S. HARBOR CITY BLVD., SUITE MELBOURNE, FL 32901	328		U00000646064 03/06/07-80016-002	, 150 00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				03/ 00/ 01/100010 002		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	·		DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
NAME STREET ADDRESS						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 addregs, with all other like empowered.

CIGNATURE.

CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

Lawes Mr