


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2004 8:00 am
Secretary of State

02-23-2004 90059 011 ***158.75

DOCUMENT # P01000035931
 1. Entity Name
 6490 REAL ESTATE INVESTMENT CO.



Principal Place of Business: ~~6470 GRIFFIN ROAD~~
 DAVIE, FL 33314
 Mailing Address: 6470 GRIFFIN ROAD
 DAVIE, FL 33314
 3582 West Tree Tops ct Davie FL 33328

DO NOT WRITE IN THIS SPACE



01192004 No Chg-P CR2E034 (10/03)

4. FEI Number: 65-1123352 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 STRAUS, ARNOLD M JR. ESQ
 10081 PINES BLVD.
 SUITE C
 PEMBROKE PINES, FL 33024

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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 \$150.00
After May 1, 2004 Fee will be \$850.00

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

10. OFFICERS AND DIRECTORS

TITLE: PD
 NAME: WHARTON, EDWARD
 STREET ADDRESS: ~~6470 GRIFFIN ROAD~~ 3582 W. Tree Tops ct
 CITY-ST-ZIP: DAVIE, FL ~~33314~~ 33328

TITLE: SD
 NAME: ~~SEISMAR, JAY~~
 STREET ADDRESS: 6470 GRIFFIN ROAD
 CITY-ST-ZIP: DAVIE, FL 33314

TITLE: SD
 NAME: JO ANN WHARTON
 STREET ADDRESS: 3582 WEST TREE TOPS CT
 CITY-ST-ZIP: DAVIE FL 33328

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

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

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

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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: Edward Wharton
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 2-14-04 954 424 1177
 Daytime Phone #