## 2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P01000058911

Address:

City-St-Zip:

FILED Mar 03, 2009 Secretary of State

Entity Na	me: SFG REA	L ESTATE INVESTMENTS, IN	IC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
	. 3 STREET O BEACH, FL	33069					
Current N	lailing Addres	s:	New Maili	New Mailing Address:			
	. 3 STREET O BEACH, FL	33069					
FEI Number	: 65-1114587	FEI Number Applied For()	FEI Number Not Appl	icable ( )	Certificate of Status Desired	1 (X)	
Name and	d Address of C	urrent Registered Agent:	Name and	Name and Address of New Registered Agent:			
8030 PETI SUITE D-1	HEODORE JES ERS ROAD 104 ION, FL 33324						
	e named entity : e of Florida.	submits this statement for the p	ourpose of changing it	ts registered o	office or registered agent, o	or both,	
SIGNATUI	RE:						
	Electror	ic Signature of Registered Age	ent		Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DPS ( ) GILINSKI, SAUI 1893 S.W. 3 ST POMPANO BEA	REET	Title: Name: Address: City-St-Zip:	(	) Change ()Addition		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	GILINSKI, FLO 1893 SW 3RD			
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	GILINSKI, ISĀ 1893 SW 3RD			
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: City-St-Zip:	GILINSKI, JON 1893 SW 3RD			
Title: Name:		Delete	Title: Name:	D ( EILEMBERG, I	) Change (X) Addition NATALIE		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

1893 SW 3RD STREET POMPANO BEACH, FL 33069

SIGNATURE: SAUL GILINSKI **DPS** 03/03/2009