FILED Apr 26, 2007 8:00 am

2007	FUR PRUFII ÇURPURATIU	П
	ANNUAL REPORT	

	ANNUAL	Secretary of State									
1. Entity Nam			04-26-2007 90186 009 ***150.00								
ANTÁRAMIAN REALTY SERVICES, INC.											
Principal Place	e of Business	Mailing Address		•	300	-					
365 FIFTH AVENUE SOUTH SUITE 201		367 W MAIN ST Northborough, Ma 01532		•	:						
NAPLES, FL		01332				 					
353		3. Mailing Address			-						
Suite, Apt. ろい		Suite, Apt. #, etc.			04172007	Chg-P	CR2E034 (12/06)				
City & State		City & State			4. FEI Number 59-3738	429		pplied For lot Applicable			
Zip Country 34/15		Zip Country		ntry	5. Certificate of Status Desired Security Securi						
<u> </u>	6. Name and Address of Current F	Registered Agent			7. Name and A	ddress of New R		-			
Name And a did in a Took T											
	IIAN, JACK J AVENUE SOUTH			Street Address	(P.O. Box Number	s Not Acceptable					
SUITE 201				4500	6-01ZD0	WIDE	<u> </u>				
NAPLES, I	NAPLES, FL 34102				PLES FL Zip Code 34/07-						
8. The above	named eptity submits this statement for	the purpose of changing its	register			in the State of Flo	. – 1 2 7	, and accept			
the obligat	ions of repartered agent.	2011		1.			1/12/	_			
SIGNATURE	Signature, typed or printed name of registered agent a	nd tible if applicable. (NOTE	74C/ Registere	ヒ J. か	7)40 July K d when reinstating)	<u> </u>	9 / / / / / / DATE	<u> </u>			
	/// 										
	E NÓW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.0	9. Election Campai Trust Fund Contr			.00 May Be ded to Fees						
10.	OFFICERS AND I		11.		ADDITIONS/C	HANGES TO OFF	ICERS AND DIRECTOR	RS IN 11			
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STREET ADORESS CITY-ST-ZIP	365 FIFTH AVENUE SOUTH #20 NAPLES, FL 34102	1			APLES F						
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CITY-ST-ZIP				(-ST-ZIP							
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 supplimental 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 of the received or trustee empewered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 it changed, or on an attachment with an address, with all other like empowered.											
	-10/M/V	/ A A A I I	(1) EU	<i>(</i> -	4/17	[10]	C7)0-257.	7011			
SIGNAT	SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICER	, –		// '	Dete .	508-393.	///			
L	(/ JACK AWTX	WY IDAN		*****							