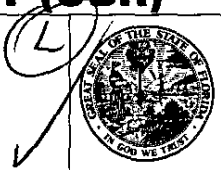


# 2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Jul 14, 2003 8:00 am**  
**Secretary of State**

0038532  
AV

DOCUMENT # P02000026567



07-14-2003 90169 019 \*\*\*150.00  
02-10-2003 90438 005 \*\*\*\*61.25

1. Entity Name  
**PERSONALIZED REALTY, INC.**

Principal Place of Business  
1110 BRICKELL AVENUE, SUITE 605  
MIAMI FL 33131

Mailing Address  
1110 BRICKELL AVENUE, SUITE 605  
MIAMI FL 33131

00131001



2. Principal Place of Business  
**1142 S.W 4<sup>th</sup> ST**

3. Mailing Address  
**1142 S.W 4<sup>th</sup> ST.**

Suite, Apt. #, etc.  
**# 2**

CHECK HERE IF MAKING CHANGES

City & State  
**MIAMI, FL**

City & State  
**MIAMI, FL**

Zip  
**33130**

Country  
**DADE**

4. FEI Number  
**03-0402405**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**WOOD, RICHARD A ESQ.**  
**BANK OF AMERICA TOWER SEVENTEENTH FLOOR**  
**100 SOUTHEAST SECOND STREET**  
**MIAMI FL 33131**

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 \$550.00**  
**After September 10, 2003 Fee will be \$750.00**  
**Make Check Payable to Florida Department of State**

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

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE	<input type="checkbox"/> Delete
NAME	<b>MCCAMMON, ROBERT KELLY</b>
STREET ADDRESS	<b>1110 BRICKELL AVENUE, SUITE 605</b>
CITY-ST-ZIP	<b>MIAMI FL 33131</b>
TITLE	<input type="checkbox"/> Delete
NAME	<b>1142 S.W 4<sup>th</sup> ST, #2</b>
STREET ADDRESS	<b>MIAMI, FL 33130</b>
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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: SIGNATURE REQUIRED **7/10/03** **305-987-5765**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (4/03)

ATTACHMENT 90142281  
PO2000026567

July 10, 2003

**Personalized Realty, Inc**  
**Robert Kelly Mccammon**  
**1142 SW 4<sup>th</sup> Street, #2**  
**Miami, Fl 33130**

Division of Corporations  
Uniform Business Report Filings  
P.O. Box 1500  
Tallahassee, Fl 32302-1500

RE: Uniform Business Report Fee

To Whom It May Concern:

Our corporation did not receive the prior notice, we have moved locations.

The original filing fee is being sent.

Sincerely,



Robert Kelly Mccammon  
Personalized Realty, Inc  
1142 SW 4<sup>th</sup> Street, #2  
Miami, Fl 33130  
Tax Id # 03-0402405