


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 01, 2004 8:00 am
Secretary of State

09-01-2004 90005 041 ***158.75

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| DOCUMENT # P02000057239 |  |
| 1. Entity Name VELOCITY REAL ESTATE, INC. | |

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| Principal Place of Business 2062 WINDWARD WAY JUPITER, FL 33477 | Mailing Address 2062 WINDWARD WAY JUPITER, FL 33477 |
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| 2. Principal Place of Business 5151 MAGNOLIA BAY Cir. Suite, Apt. #, etc. | 3. Mailing Address 5151 MAGNOLIA BAY Cir. Suite, Apt. #, etc. |
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| City & State PALM BEACH GARDENS, FL | City & State PALM BEACH GARDENS, FL |
| Zip 33418 | Country U.S.A. |
| Zip 33418 | Country |

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| 6. Name and Address of Current Registered Agent JARVIS, DOREEN A 2062 WINDWARD WAY JUPITER, FL 33477 | | 7. Name and Address of New Registered Agent Name DOREEN A. JARVIS Street Address (P.O. Box Number is Not Acceptable) 5151 MAGNOLIA BAY CIRCLE City PALM BEACH GARDENS FL Zip Code 33418 | |
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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 Doreen A. Jarvis <small>Signature, typed or printed name of registered agent and title, if applicable</small> | DATE 8/30/04 <small>(NOTE: Registered Agent signature required when reinstating)</small> |

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| FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees | In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |
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| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | P JARVIS, DOREEN A 2002 WINDWARD WAY JUPITER, FL 33477 <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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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: Doreen A. Jarvis <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> | DATE 8/30/04 (561) 776-2880 <small>Date Daytime Phone #</small> |