

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000077180

Entity Name: MASTERS REALTY, INC.

FILED
Mar 30, 2007
Secretary of State

Current Principal Place of Business:

7353 W. SANDLAKE RD
100
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

7353 W. SANDLAKE RD
100
ORLANDO, FL 32819

New Mailing Address:

FEI Number: 56-2282700

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASANAS, LUIS A
7353 W. SANDLAKE RD
SUITE 100
ORLANDO, FL 32819 US

Name and Address of New Registered Agent:

STERNS, CHRISTOPHER
7353 W. SANDLAKE RD
SUITE 100
ORLANDO, FL 32819 US

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.

SIGNATURE: CHRISTOPHER STERNS

03/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DIR () Delete
Name: CASANAS, LUIS A
Address: 7353 W. SANDLAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: SH () Delete
Name: HAMZEHLLOUI, HOOMAN
Address: 7353 W. SANDLAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: DIR (X) Delete
Name: CASANAS, LUIS A
Address: 7353 W. SANDLAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: SH (X) Delete
Name: HAMZEHLLOUI, HOOMAN
Address: 7353 W. SANDLAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: DIR (X) Delete
Name: CASANAS, LUIS A
Address: 7353 W. SANDLAKE RD
City-St-Zip: ORLANDO, FL 32819

Title: SH (X) Delete
Name: HAMZEHLLOUI, HOOMAN
Address: 7353 W. SANDLAKE RD
City-St-Zip: ORLANDO, FL 32819

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SH (X) Change () Addition
Name: HAMZEHLLOUI, HOOMAN
Address: 7353 SANDLAKE RD. 100
City-St-Zip: ORLANDO, FL 32819

Title: OF (X) Change () Addition
Name: STERNS, CHRISTOPHER
Address: 7353 SANDLAKE RD. #100
City-St-Zip: ORLANDO, FL 32819

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: CHRISTOPHER STERNS

OF

03/30/2007

Electronic Signature of Signing Officer or Director

Date