

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000078161

FILED  
May 23, 2008  
Secretary of State

Entity Name: SOKOL REAL ESTATE HOLDINGS, INC.

**Current Principal Place of Business:**

5355 TENTH FAIRWAY DRIVE #2  
DELRAY BEACH, FL 33484

**New Principal Place of Business:**

**Current Mailing Address:**

5355 TENTH FAIRWAY DRIVE #2  
DELRAY BEACH, FL 33484

**New Mailing Address:**

FEI Number: 52-2372407

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WARM, STEVE ESQ.  
BOCA CORPORATE CENTER  
2101 CORPORATE BOULEVARD, SUITE 215  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: SOKOL, ABE  
Address: 5355 TENTH FAIRWAY DRIVE #2  
City-St-Zip: DELRAY BEACH, FL 33484

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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.

SIGNATURE: ABRAHAM SOKOL

D

05/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date