


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 20, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # P02000079695</b>	
1. Entity Name FIRST CHOICE REALTY GROUP, INC.	

Principal Place of Business 6401 CONGRESS AVENUE SUITE 140 BOCA RATON, FL 33487	Mailing Address 6401 CONGRESS AVENUE SUITE 140 BOCA RATON, FL 33487
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**DO NOT WRITE IN THIS SPACE**



04182006 No Chg-P CRZE034 (11/05)

4. FEI Number 55-0755026	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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**6. Name and Address of Current Registered Agent**

STEVEN LIPPMAN  
6401 CONGRESS AVE. STE. 140  
BOCA RATON, FL 33487

**DO NOT WRITE  
IN THIS SPACE**

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 reinstalling) DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V LIPPMAN, KAREN 6401 CONGRES AVE. STE. 140 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BRUCK, JOYCE 6401 CONGRESS AVE. # 140 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LIPPMAN, STEVE 6401 CONGRESS AVE. ATE. 140 BOCA RATON, FL 33487
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000521840  
05/03/06-80005-013 150.00

**DO NOT WRITE  
IN THIS SPACE**

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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/06

561-999-9701