

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90254 044 ***150.00

DOCUMENT # P02000103051

1. Entity Name
CONTEMPORARY REALTY, INC.



Principal Place of Business
1450 MADRUGA AVENUE, SUITE 303
CORAL GABLES, FL 33146

Mailing Address
1450 MADRUGA AVENUE, SUITE 303
CORAL GABLES, FL 33146

60003007

2. Principal Place of Business
1500 San Remo Avenue
Suite, Apt. #, etc.
Suite 410
City & State
Coral Gables

3. Mailing Address
1500 San Remo Avenue
Suite, Apt. #, etc.
Suite 410
City & State
Coral Gables

01092006 Chg-P CR2E034 (11/05)

4. FEI Number
05-0532368

Applied For
Not Applicable

Zip
33146

Country
USA

Zip
33146

Country
USA

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

6. Name and Address of Current Registered Agent

COSCULLUELA, JR., EUGENIO
1450 MADRUGA AVENUE, SUITE 303
CORAL GABLES, FL 33146

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
1500 San Remo Avenue, Suite 410
City Coral Gables FL Zip Code 33146

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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 P
NAME PUENTE, ALEJANDRO ☐ Delete
STREET ADDRESS 1450 MADRUGA AVE., SUITE 303
CITY-ST-ZIP MIAMI, FL 33146

TITLE VP
NAME HINDS, JAMES ☐ Delete
STREET ADDRESS 1450 MADRUGA AVE., SUITE 303
CITY-ST-ZIP MIAMI, FL 33146

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 1500 San Remo Avenue, Suite 410
CITY-ST-ZIP Coral Gables, FL 33146

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS 1500 San Remo Avenue, Suite 410
CITY-ST-ZIP Coral Gables, FL 33146

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 person 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: ALEJANDRO PUENTE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/06 305 662 6840
Date Daytime Phone #