

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90001 020 ***150.00

DOCUMENT # P02000132623

1. Entity Name
SELL HOMES REALTY, INC.



Principal Place of Business
**2747 NW 170TH STREET
MIAMI, FL 33056**

Mailing Address
**2747 NW 170TH STREET
MIAMI, FL 33056**

54064481



07122004 No Chg-P CR2E034 (10/03)

4. FEI Number 26-0058803	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CLARKE, ENID
12074 MIRAMAR PKWY
MIRAMAR, FL 33025**

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	CLARKE, ENID
STREET ADDRESS	2747 N.W. 170 STREET
CITY-ST-ZIP	MIAMI, FL 33056

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	
NAME	
STREET ADDRESS	
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TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/2/04 786-286-9966

Attachment 524066/481



FLORIDA DEPARTMENT OF STATE
Secretary of State
Glenda E. Hood
DIVISION OF CORPORATIONS
P.O. Box 6327
Tallahassee, Florida 32314

First-Class Mail
U.S. Postage
PAID
State of Florida
84321

NOTICE OF INTENT TO DISSOLVE

0047502 01 AV 0.178 **AUTO T4 1 1203 33056-443847



SELL HOMES REALTY, INC.
2747 NW 170TH STREET
MIAMI FL 33056-4438

To receive the form by mail:

- Detach this postcard.
- Enter address to mail report to, if different from preprinted mailing address.
- Affix postage on reverse side and mail.
- Allow 10-14 business days to receive form.

Document # P02000132623

SELL HOMES REALTY, INC.
2747 NW 170TH STREET
MIAMI FL 33056-4438

Mail Report to:



Attachment

54064481

Sell Homes Realty
2747 NW 170th STREET

July 12, 2004

Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

Dear Sir or Madam:

We recently received your notice regarding our annual report. A copy is attached for your convenience.

Our annual report was late because we did not receive the blank form from your office. We realized that we did not send the report when we received your notice.

Once we received the form we returned it with a check within a week's time.

Because of this we are asking that the \$400 late filing penalty be waived under the provisions of chapter 607.193(2)(b) ss. 607.0122, 608.452, and 620.182

Sincerely,



Enid Clarke, President