

2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT # P03000016608 1. Entity Name VENTURE REAL ESTATE SERVICES, INC.				 AMENDED ANNUAL REPORT 05 NOV 18 PM 1:10 SECRETARY OF STATE TALLAHASSEE, FLORIDA	
Principal Place of Business 3621 S. FEDERAL HWY BOYNTON BEACH, FL 33435			Mailing Address 3621 S. FEDERAL HWY BOYNTON BEACH, FL 33435		
2. Principal Place of Business 1098 MILITARY TRAIL PO BOX 728 JUPITER, FLORIDA 33468		3. Mailing Address Suite, Apt. #, etc. SAME		 11092005 REIN-P CR2E098 (6/04)	
City & State 33468		City & State		4. FEI Number APPLIED FOR	
Zip 33468		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MCCLINTOCK, HARVEY H 3621 S FEDERAL HWY BOYNTON BEACH, FL 33435				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After January 1, 2006, Fee will be \$300.00			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE D <input type="checkbox"/> Delete NAME MCCLINTOCK, HARVEY STREET ADDRESS 3621 S. FEDERAL HWY CITY-ST-ZIP BOYNTON BEACH, FL 33435			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME 1098 MILITARY TRAIL STREET ADDRESS PO BOX 728 CITY-ST-ZIP JUPITER, FLORIDA 33468		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition NAME JONATHAN MCCLINTOCK STREET ADDRESS 1098 MILITARY TRAIL CITY-ST-ZIP PO BOX 728 JUPITER, FLORIDA 33468		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME 700061552497 STREET ADDRESS 11/18/05--01053--012 CITY-ST-ZIP **\$1.25		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
Date 11/9/05 Daytime Phone # 561-400-1144					