2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 23, 2004 8:00 am Secretary of State 7/1

DOCUMEN I # P03000016650 1. Entity Name PRIMACLE REALTY, INC.						07-13	2-2004 90023 00	9 ***550.00
Principal Place of Business Mailing Address								
!	· .	Mailing Address						
7501 NW 4TH STREET		7501 NW 4TH STREET			66430509			
SUITE 207 Plantation, Fl. 33317 US		SUITE 207			0040000			
PUNITATION	I, FL 33317 US	PLANTATION, FL 33317 US			118000000			
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.		07072004	Chg-P	CR2E034 (10/03)		
City & State		City & State			4. FEI Numb	** * 7812		pplied For of Applicable
Zip	ip Country Zip Co		Country	····		of Status Desired	\$8.75 Ad	
					-p:-Certificate	of Status Desired—	Fee Require	ed -
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent								
FERGUSON, CARLTON B				Name				
7501 NW 4 SUITE 207	TH STREET		Street Address (P.O. Box Nun	er i No Agceolable	. , -	
	ON, FL 33317					\ 7 		
\wedge			Cit		· · · · · · · · · · · · · · · · · · ·		FL Zip Coc	Je
8: The above named entity authoris 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 prison name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 7804 OATE								
		AND TELE	advatered y devi	eithumphie tedniseq	when reinstating)	•	DATE /	
FILE NOWILL FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be Due by September 8, 2004 1 Trust Fund Contribution. Added to Fees								
10,	OFFICERS AND I	DIRECTORS	11.		ADDITIONS	/CHANGES TO OFF	CERS AND DIRECTOR	S IN 11 /
MILE	President	☐ Delete	TITLE				Change	Addition
NAME	Carilton Ferguso	n	NAME					
STREET ADORESS CITY-ST-ZIP	7501 NW 4th St, Plantation, FL	Suite 207	STREET ADDRESS City-St-Znp					
TITLE		□ Delete	TITLE		-			
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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 frustee 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 addition, with all other like empowered.								
SIGNATURE: 7/8/0 4 (954 727 - 9788								
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