2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P03000025020

REAL ESTATE MANAGEMENT & DEVELOPMENT GROUP, INC.



FILED Apr 21, 2008 08:00 All Secretary of State

Principal Place of Business

8700 WEST FLAGLER STREET

SUITE 355 MIAMI, FL 33174 Mailing Address

8700 WEST FLAGLER STREET

SUITE 355

MIAMI, FL 33174



DO NOT WRITE IN THIS SPACE

01072008

No Chg-P

CR2E034 (11/05)

4. FEI Number 13-4240962

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

REGISTERED AGENTS OF FLORIDA, LLC 100 S.E. SECOND STREET **SUITE 2900** MIAMI, FL 33131

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	named entity submits this statement for the plions of registered agent.	ourpose of changing its re	gistere	d office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accep
SIGNATURE.						
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered				d Agent signature required when reinstating) DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Trust Fund Contrib		cing 🗀	\$5.00 May Be Added to Fees	U00000909085 05/06/08-80055-014 150.00
10. OFFICERS AND DIRECTORS						,
TITLE	Р					
NAME	DAVILA, JORGE					
STREET ADDRESS	8700 WEST FLAGLER STREET, SUITE 355					•
CITY - ST- ZIP	MIAMI, FL 33174					
TITLE	VPS					
NAME	GUTIERREZ, ARIEL E					

DO NOT WRITE IN THIS SPACE

STREET ADDRESS 8700 WEST FLAGLER STREET, SUITE 355 CITY-ST-ZIP MIAMI, FL 33174 TITLE NAME RODRIGUEZ, MICHAEL STREET ADDRESS 8700 WEST FLAGLER STREET, SUITE 355 CITY-ST-ZIP MIAMI, FL 33174 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE 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 had 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: Ariel E. Gutierrez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR D

01/07/2008

305 553-8911

Daytime Phone #