# FILED Feb 26, 2007 8:00 am Secretary of State

2007	ANNUAL REPORT	•
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1. Entity Nam	DOCUMENT # P03000043515  I. Entity Name MOUNTAIN REAL ESTATE INVESTMENT, INC.					,,	02-26-2007	_		
7000 ISLAND BLVD UNIT 1402 RJS - 2 AVENTURA, FL 33160 SUITE				ng Address - 201 S BISCAYNE BLVD TE 1500 MI, FL 33131						
2. Principal Place of Business - No P.O. Box #			3. Mailing Address 7000 Island Blvd				<b>                                    </b>			
Suite, Apt. #, etc.			Suite, Apt. #, etc 1402			01082007	Chg-P	CR2E034	(12/06)	
City & State			City & State Aventura, FL			4. FEI Numb			-	olied For Applicable
Zip	Country		Zip 33160	l l		5. Certificate of Status Desired .			\$8.75 Additional Fee Required	
	6. Name	and Address of Current	Registered Agent		Name	7. Name and	Address of New Re	gistered Ag	ent	
HERNANDEZ, ARNANDO CPA 255 ALITAMBAR CIRCL STE 720				Street Address (P.O. Box Number is Not Acceptable)						
CORAL GA	ABLES, F	L 33134			City			FL	Zip Code	:
		ly submits this statement fo dered agent.	r the purpose of chan	iging its register	ed office or register	red agent, or bo	oth, in the State of Flor		miliar with, a	and accept
SIGNATURE_	Signature, typec	d or proted name of respirited agent	and little if applicable	(NOTE Registere	d Aprint signature required	d when reinstating)		DATE		
		FEE IS \$150.00 7 Fee will be \$550.		Campaign Finar nd Contribution		.00 May Be led to Fees				
10,		OFFICERS AND	DIRECTORS	11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS	/CHANGES TO OFFI	CERS AND D	IRECTORS	HN 11
TITLE NAME STREET ADDRESS OHY-ST-ZIP	7000 ISL	ONSALVE, MANUEL AND BLVD UNIT 1402 RA, FL 33160	☐ Dele	NAM STRO				[	Change	Addition
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NAME STREET ADDRESS CITY-ST-ZIP					ET ADDRESS - ST-ZIP					
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STREET ADDRESS CHY+ST-ZIP				1	ET ADDRESS -ST-ZIP					
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STREET ADDRESS CHY-ST-ZIP					ET ADORESS -ST-ZIP					
TITLE NAME STREET ADDRESS			☐ Dek	NAM					Change	Addition
CITY: \$1 - ZIP				CITY	-SI-ZIP					
indicated of the cor	on this reportion or i	ne information supplied with ort or supplemental report in the receiver or trustee emp tachment with an address,	s true and accurate ar owered to execute thi	nd that my signa is report as requi	ture shall have the	same legal effe	ct as if made under o	ath; that I an	n an officer	or director
SIGNATURE:  SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  Date  Date  Director										

# **ATTACHMENT**

40024601

## **Filing Instructions**

### Form 2007-Corporation Annual Report

Name: MOUNTAIN REAL ESTATE INVESTMENT, INC.

**Remittance:** Payment for \$150.00 Payable to Florida Department of State.

Write the document number on the check. (P03000043515)

Mail to: Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Signature: The form should be signed and dated as well as telephone number

Due Date: Before April 30, 2007

Other: Please review if the address & the officers of the corporations are

correct if not write the correct ones in the spaces indicated

Date: January 8/2007