## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000053885

FILED Apr 24, 2007 Secretary of State

Entity Name: SHOWCASE OF PROPERTIES OF SOUTH EAST FLORIDA, INC.

Current P	rincipal Place of	Business:	New Princ	New Principal Place of Business:  1605 S.U.S. 1 S4F JUPITER, FL 33477  New Mailing Address:		
	ORIDA MANGO I BEACH, FL 3340		S4F			
Current N	lailing Address:		New Maili			
	ORIDA MANGO I BEACH, FL 3340		1605 S.U.S S4F JUPITER,			
FEI Number	: 27-0061813	FEI Number Applied For()	FEI Number Not App	licable ( )	Certificate of Status Desired ( )	
Name and	d Address of Cui	rent Registered Agent:	Name and	Name and Address of New Registered Agent:		
1750 N FL	JE, AARON C .ORIDA MANGO I BEACH, FL 3340!		4975 N.W.	LAMANQUE, AARON C 4975 N.W. 10TH STREET COCONUT CREEK, FL 33063 US		
	e named entity sub e of Florida.	omits this statement for the	purpose of changing i	ts registered off	ice or registered agent, or both	
SIGNATUI	RE:			04/24/2007		
	Electronic	Signature of Registered Ac	jent		Date	
Election Ca	mnaign Financing T					
	pag	rust Fund Contribution ( ).				
OFFICER	S AND DIRECTO	( )	ADDITION	IS/CHANGES T	O OFFICERS AND DIRECTO	
Title: Name: Address:		PRS: elete Y ANN EANWAY - S4F	ADDITION Title: Name: Address: City-St-Zip:		O OFFICERS AND DIRECTO Change ( ) Addition	
OFFICER: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	S AND DIRECTO  DPT () De  LAMANQUE, MAR' 1605 S US 1 & OO  JUPITER, FL 334'  DV () De  LAMANQUE, AARO	PRS: elete Y ANN EANWAY - S4F 77 elete DN C MANGO RD STE 407	Title: Name: Address:	( ) C DV (X) C LAMANQUE, AAR 4975 N.W. 10TH	Change ( ) Addition  Change ( ) Addition  CON C  STREET	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY ANN LAMANQUE DPT 04/24/2007