

**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P03000076365

**FILED**  
**May 01, 2006**  
**Secretary of State**

**Entity Name:** WISE CHOICE REALTY, INC.

**Current Principal Place of Business:**

8200 NW 169TH TERRACE  
MIAMI, FL 33016

**New Principal Place of Business:**

7950 NW 155 STREET  
SUITE 101  
MIAMI LAKES, FL 33016

**Current Mailing Address:**

8200 NW 169 TERRACE  
MIAMI, FL 33016

**New Mailing Address:**

7950 NW 155 STREET  
SUITE 101  
MIAMI LAKES, FL 33016

**FEI Number:** 37-1485232      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CASTRO, IDANIA  
8200 NW 169TH TERRACE  
MIAMI, FL 33016    US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: CASTRO, IDANIA  
Address: 8200 NW 169TH TERRACE  
City-St-Zip: MIAMI, FL 33016

Title: D (X) Delete  
Name: MAYOR, XIOMARA  
Address: 8200 NW 169TH TERRACE  
City-St-Zip: MIAMI, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: IDANIA CASTRO

PD

05/01/2006

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date