2005 FOR PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # P03000114856 02-07-2005 90094 019 ***150.00 FIRST FLORIDA REAL ESTATE SPECIALISTS, INC. Principal Place of Business Mailing Address 50011332 675 E. HWY. 50 675 E. HWY. 50 CLERMONT, FL 34711 CLERMONT, FL 34711 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02012005 CR2E034 (10/03) City & State City & State 4. FFI Number Applied For 20-0384446 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent JORDAN, EDWARD P II Street Address (P.O. Box Number is Not Acceptable) 1460 EAST HWY. 50 CLERMONT, FL 34711 Zip Code FL 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 VD TITLE Vice-President ☐ Delete Addition NAME GUADALUPE, ANTONIO Guadalupe, Antonio NAME 675 E. HWY. 50 STREET ADDRESS 675 E. HWY. 50 STREET ADDRESS FL 34711 CITY-S1-ZIP CLERMONT, FL 34711 Lermont. CITY-ST-ZIP President STD ☐ Delete TITLE Change Addition Cordero, Hario CORDERO, MARIO G NAME NAME 675 E. HWY 50 STREET ADDRESS 675 E. HWY. 50 STREET ADDRESS 34711 Clermont, FL CITY-ST-7IP CLERMONT, FL 34711 CITY-\$1-ZIP Secretary IIILE Delete TITLE Change Addition Rosario Guadolupe NAME STREET ADDRESS STREET ADDRESS Clermont, FL CITY-S1-ZIP CITY-ST-ZIP TITLE □ Detere TITLE Change Addition shelly Lynn Cor 675 E. Hwy 50 NAME NAME STREET ADDRESS STREET ADDRESS Clermont FL 34711 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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 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, withhell other like empowered.

STREET ADDRESS

CITY - ST-ZIP

NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OPPOPULATED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

1/31/05

FILED Feb 07, 2005 8:00 am

352-243-1955

Change

Addition