2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P03000122484

S & D REALTY EXCHANGE, INC.



Principal Place of Business

7040 SOUTH ATA HIGHWAY MELBOURNE BEACH, FL 32951 2299 SARNO Rd, STE-A MEIBWANE FI 32935

Mailing Address

7040 SOUTH A1A HIGHWAY MELBOURNE BEACH, FL-32951 590 PRELUTE ST. NW PALM BAY, FloRINA

FILED Mar 14, 2006 8:00 am **Secretary of State**

03-14-2006 90016 005 ***150.00



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5. Name and Address of Current Registered Agent

01002006 140 Chg-F	CRZE004	CR2E034 (11/03)		
4. FEI Number		Applied For		
51-0489498		Not Applicable		
5. Certificate of Status Desired		.75 Additional		

Fee Required

BASH, JOSHUA D 20801 BISCAYNE BOULEVARD SUITE 304 AVENTURA, FL 33180

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	ions of registered agent.	urpose of changing its registe	ered office or req	distered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered egent and title	applicable. (NOTE: Registe	ered Agent signature n	quired when reinstating)	DATE
FIL After Ma	E NOWIII FEE IS \$150.00 ny 1, 2006 Fee will be \$550.00	Election Campaign Final Trust Fund Contribution		\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST DELUCAS, DONALD 2299 SARNO RD, STE A MELBOURNE, FL 32935				
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY+ST-ZIP				IN ⁻	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
	certify that the information supplied with this fi	ling does not qualify for the e	exemptions cont	ained in Chapter 119	9, 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, with all other like empowered.

SIGNATURE: Smed & Lugar	DONALD	DELUCAS	2/28/06	321-726-9755
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNIN	OFFICER OR DIRECTOR	PRESIDENT	Catte	Daytime Phone #