

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000003955

FILED
Mar 06, 2007
Secretary of State

Entity Name: REAL XPOSURE, INC.

Current Principal Place of Business:

8830 S ISLES CIRCLE
TAMARAC, FL 33321 US

New Principal Place of Business:

4699 N STATE ROAD 7
SUITE U,
LAUDERDALE LAKES, FL 33319 US

Current Mailing Address:

8830 S ISLES CIRCLE
TAMARAC, FL 33321 US

New Mailing Address:

4699 N STATE ROAD 7
SUITE U
LAUDERDALE LAKES, FL 33319 US

FEI Number: 54-2143301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBERTS, LEON-LEE
8830 S. ISLES CIRCLE
TAMARAC, FL 33321 US

Name and Address of New Registered Agent:

ROBERTS, LEON-LEE
4699 N STATE ROAD 7
SUITE U
LAUDERDALE LAKES, FL 33319 US

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: LEON ROBERTS

03/06/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: ROBERTS, LEON-LEE
Address: 8830 S ISLES CIRCLE
City-St-Zip: TAMARAC, FL 33321 US

Title: V P () Delete
Name: ROBERTS, DELVA
Address: 8830 S ISLES CIRCLE
City-St-Zip: TAMARAC, FL 33321 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: ROBERTS, LEON-LEE
Address: 248 N W 90TH AVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: VP (X) Change () Addition
Name: ROBERTS, DELVA
Address: 248 NW 90TH AVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

Title: SEC () Change (X) Addition
Name: BLAIR, NOVIA
Address: 248 NW 90TH AVE
City-St-Zip: CORAL SPRINGS, FL 33071

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: LEON ROBERTS

PRES

03/06/2007

Electronic Signature of Signing Officer or Director

Date