2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000032070

Entity Name: PROPERTY EXCHANGE, INC.

FILED Apr 28, 2005 Secretary of State

Littly Nan	HE. PROPERTI EXCHANGE, INC.		
Current Principal Place of Business:		New Principal Place of Business:	
425 NE 5TI BOCA RAT	H ST. FON, FL 33432	425 N.E. 5 ST. BOCA RATON, FL 33432	
Current M	ailing Address:	New Mailing Address:	
425 NE 5TI BOCA RAT	H ST. FON, FL 33432	425 N.E. 5 ST. BOCA RATON, FL 33432	
FEI Number:	83-0384891 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered Agent:		: Name and Address of New Registered Agent:	
LEE, JAME 2500 NW 3 BOCA RAT		LEE, GARY S 2500 NW 39TH ST. BOCA RATON, FL 33434 US	
The above in the State		he purpose of changing its registered office or registered agent, or b	oth,
SIGNATURE: GARY S. LEE		04/28/2005	
	Electronic Signature of Registered	Agent Date	
Election Can	npaign Financing Trust Fund Contribution ().		
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIREC	TORS:
Title: Name: Address: City-St-Zip:	PD () Delete LEE, GARY S 2500 NW 39TH ST. BOCA RATON, FL 33434	Title: () Change () Addition Name: Address: City-St-Zip:	
Title: Name: Address: City-St-Zip:	VD () Delete STEIN, JAMES M 425 NE 5TH ST. BOCA RATON, FL 33432	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 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 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: GARY S. LEE P 04/28/2005