2007 FOR PROFIT CORPORATION ANNUAL REPORT

1. Jan.

FILED Apr 30, 2007 8:00 am Secretary of State

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DOCUMENT # P04000037493 1. Entity Name FLORIDA REAL ESTATE INVESTMENT MANAGEMENT, INC.							J824 U28 ****15U	00
Principal Place of Business Mailing Address						360-		
999 PONCE DE LEON BLVD STE 719 7200 N.W. 19 ST. SUITE 301 CORAL GABLES, FL 33134 MIAMI, FL 33126								
Principal Place of Business - No P.O. Box # Mailing Address								
701	water local why	Same a	Same as Abova Suite, Apt. #, etc.				, 20189 (441) (201) Brain (8189 II	/EEF 11 18E1
Suite, Apt.		Suite, Apt. #, e	Suite, Apt. #, etc.			Chg-P	CR2E034 (12/06)	
City & Stat	mi. A	City & State	City & State			Der 26939	 	plied For t Applicable
3312 L	Country	Zip	Cour	ntry		e of Status Desired	\$8.75 Add	itional
	6. Name and Address of Current	Registered Agent		1	7. Name an	d Address of New R	<u>`</u>	
							-9	
GUERNICA, EDUARDO A 7200 N.W. 19 ST. SUITE 301 MIAMI, FL 33126				Street Address (P.O. Box Number is Not Acceptable)				
, , 2								
				City	ity FL Zip Code			
8. The above	named entity submits this statement fo	r the purpose of char	nging its register	ed office or r	registered agent, or b	oth, in the State of Flo	rida. I am familiar with,	and accept
the obligat	tions of registered agent.				-			,
SIGNATURE_	Signature, typed or printed name of registered agent	and title if applicable.	(NOTE Registers	ed Agent signature	e required when reinstating)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1; 2007 Fee will be \$550.00 9. Election Campaign Finar Trust Fund Contribution.				\$5.00 May Be Added to Fees				
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFFI	CERS AND DIRECTOR	S IN 11
TITLE	P	Del	ete TITL	E			☐ Change	Addition
NAME	_ ·		NAM	_				
STREET ADDRESS CITY-ST-ZIP	I I			EET ADDRESS '-ST-ZIP				
TITLE	S	□ De			S:	.	Change	☐ Addition
NAME	GUERNICA, EDUARDO A	Del	NAM-	KE (<u>.</u>	due colo 4	La Change	L Addition
STREET ADDRESS	1				Guernia, Ł	DAMO O N .		
CITY-ST-ZIP	999 PONCE DE LEON BLVD. #7	19	STR	EET ADORESS	Guernia, E 1200 N.D. 19	34,5WHe#30))	
	999 PONCE DE LEON BLVD. #7 CORAL GABLES, FL 33134	19))	
TITLE		19 □ Del	CITY	/-ST-ZIP	Mlami, Fl. 3	33 <i>1</i> 26	○J Change	☐ Addition
TITLE NAME	CORAL GABLES, FL 33134 T CARRERAS, FRANK	☐ Del	ete TITL NAM	Y-ST-ZIP E	Mlami, Fl. 3 T Carreras, Fl	33126 241K	Change	☐ Addition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

STREET ADORESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECT

4-26-07

305-417-020

Daytime Pho