


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2008 08:00 AM
Secretary of State

DOCUMENT # P04000046277 1. Entity Name FLAGLER & 27TH PROPERTY, INC.	
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Principal Place of Business 2700 W. FLAGLER ST MIAMI, FL 33135	Mailing Address 3191 CORAL WAY SUITE #1008 MIAMI, FL 33145
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DO NOT WRITE IN THIS SPACE



01232008 No Chg-P CR2E034 (11/05)

4. FEI Number 01-0809741	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

STONE, DAVID ESQ
 3191 CORAL WAY, #1008
 MIAMI, FL 33145

DO NOT WRITE IN THIS SPACE

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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____
Signature: typed or printed name of registered agent and title if applicable

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

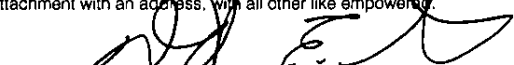
9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000940246
 05/28/08-80058-022 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P STONE, DAVID ESQ 3191 CORAL WAY #1008 MIAMI, FL 33145
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TS SOSTCHIN, HENRIETTA 3191 CORAL WAY #1008 MIAMI, FL 33145
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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.

SIGNATURE:  **1/28/08 305-476-7767**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #