## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000051723

Address:

City-St-Zip:

6803 ROSEMARY DRIVE

TAMPA, FL 33625

FILED Aug 16, 2005 Secretary of State

Entity Nai	me: FLOR	IDA FLAT FEE RI	EALTORS, INC.					
Current Principal Place of Business:				New Prince	New Principal Place of Business:			
6803 ROS TAMPA, F	EMARY DR L 33625	RIVE						
Current Mailing Address:				New Maili	New Mailing Address:			
6803 ROS TAMPA, F	EMARY DR L 33625	RIVE						
FEI Number: 30-0237888 FEI Number Applied For ( )			FEI Number Not App	licable ( )	Certificate of Status Desired ( )			
Name and Address of Current Registered Agent:				Name and	Name and Address of New Registered Agent:			
KATZ, MA 6803 ROS TAMPA, F	<b>EMARY DR</b>	a. US						
	named ent e of Florida.		atement for the p	ourpose of changing i	ts registere	d office or registered agent, or both,		
SIGNATUR	RE:							
	Elect	tronic Signature o	f Registered Age	ent		Date		
		7.193(2)(b), F.S., the cing Trust Fund Co	•	t receive the prior notic	e.			
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	P KATZ, MAT 6803 ROSE TAMPA, FL	MARY DRIVE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition		
Title: Name:	S KATZ. MAD	() Delete EKYN G		Title: Name:	S KATZ. MAD	(X) Change ( ) Addition ELYN G		

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TAMPA, FL 33625

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: MADELYN KATZ S 08/16/2005