## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P04000096876

Entity Name: SELLSTATE METRO REALTY, INC.

FILED Dec 18, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

5200 BLUE LAGOON DR. #120 5200 BLUE LAGOON DR #120

MIAMI, FL 33126 MIAMI, FL 33126

**Current Mailing Address: New Mailing Address:** 

5200 BLUE LAGOON DR. #120 218 SE 14 ST #2004 MIAMI, FL 33126 MIAMI, FL 33131

FEI Number: 20-1301855 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:

SPIEGEL & UTRERA, P.A. CLAVEL, LEONARDO 1840 SW 22ND ST. 1717 N BAYSHORE DR 4TH FLOOR MIAMI, FL 33132 MIAMI, FL 33145 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: LEONARDO CLAVEL 12/18/2007

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSTD ( ) Delete Title: **PSTD** (X) Change ( ) Addition

CLAVEL, LEONARDO Name: Name: CLAVEL, LEONARDO 1325 NW 93RD CT STE B103 1717 N BAYSHORE DR Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: MIAMI, FL 33172

Title: VD () Delete Title: () Change () Addition

Name: COX. WILLIAM Name: 1325 NW 93RD CT STE B103 Address: Address: MIAMI, FL 33172 City-St-Zip: City-St-Zip:

( ) Delete Title: Title: VΡ (X) Change ( ) Addition

CRESSWELL, NEIL Name: CLAVEL, JEAN-PAUL Name: 12800 UNIVERSITY DR. STE 575 Address: 1717 N BAYSHORE DR Address: City-St-Zip: FORT MYERS, FL 33907 City-St-Zip: MIAMI, FL 33132

I hereby certify that the information supplied with this filing does not qualify 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: LEONARDO CLAVEL **PSDT** 12/18/2007