## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000099380

Entity Name: POWER REAL ESTATE GROUP INC

3900 W FLAGLER STREET

MIAMI, FL 33134

Address:

City-St-Zip:

FILED Apr 08, 2009 Secretary of State

Entity Nai	me: POWER	REAL ESTATE GROUP INC				
Current Principal Place of Business:			New Principal Place of Business:			
	ANVIEW AVE DN, FL 33050					
Current M	lailing Addres	s:	New Mailing Address:			
	ANVIEW AVE DN, FL 33050					
FEI Number	: 56-2536071	FEI Number Applied For()	FEI Number Not Appl	cable ( ) Ce	ertificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Address of New Registered Agent:			
ZAPATA, I 3900 W FL MIAMI, FL	AGLER STRE	ET	420 N.W. 4	ZAPATA, DAMIAN 420 N.W. 49TH AVE. MIAMI, FL 33126 US		
	named entity see of Florida.	submits this statement for the p	ourpose of changing it	s registered office	or registered agent, or both,	
SIGNATU	RE: DAMIAN I	ZAPATA			04/08/2009	
	Electron	ic Signature of Registered Age	ent		Date	
Election Car	ոpaign Financing	g Trust Fund Contribution ( ).				
OFFICER	S AND DIREC	TORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	COMAS, VILMA 114 PONCE DE	Delete : : LEON BLVD., SUITE A S, FL 33135 US	Title: Name: Address: City-St-Zip:	( ) Cha	ange ( ) Addition	
Title: Name: Address: City-St-Zip:	CORDOVA, MA 114 PONCE DE	Delete YDA : LEON BLVD. SUITE A S, FL 33135 US	Title: Name: Address: City-St-Zip:	( ) Cha	ange ( ) Addition	
Title: Name: Address: City-St-Zip:	FALCON, BARE 114 PONCE DE	Delete BARA E LEON BLVD. SUITE A S, FL 33135 US	Title: Name: Address: City-St-Zip:	( ) Cha	ange ( ) Addition	
Title: Name:	O () ZAPATA, DAMIA	Delete AN	Title: Name:	O (X) Cha ZAPATA, DAMIAN	ange ( ) Addition	

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.

Address:

City-St-Zip:

420 N.W. 49TH AVENUE

MIAMI, FL 33126

SIGNATURE: DAMIAN ZAPATA O 04/08/2009