2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# P04000115518

Entity Name: VERNA-CARA REAL ESTATE, INC.

Current Principal Place of Business:

2039 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33309 US

New Principal Place of Business:

2039 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33322 US

Current Mailing Address:

2039 NORTH UNIVERSITY DRIVE
SUNRISE, FL 33322 US

New Mailing Address:

FEI Number: 20-1463514 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GERRITS, ANDREW T ESQ.
6350 NORTH ANDREWS AVENUE
SUITE 100
FORT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: VERNA, FRANK
Address: 2039 N. UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322 US

Title: VP ( ) Delete
Name: CARACCIOLO, ALFRED
Address: 2039 N. UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322 US

Title: S/T ( ) Delete
Name: VERNA, ANTONETTE
Address: 2039 N. UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322 US

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change ( ) Addition
Name: VERNA, ANTONETTE
Address: 2039 N. UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322 US

Title: T ( ) Change (X) Addition
Name: CARACCIOLO, PAMELA
Address: 2039 N. UNIVERSITY DRIVE
City-St-Zip: SUNRISE, FL 33322

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: FRANK C VERNA P 04/25/2005
Electronic Signature of Signing Officer or Director Date