

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000025300

FILED
Jan 22, 2007
Secretary of State

Entity Name: DESIREE PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

2600 NW 103 ST
MIAMI, FL 33150

New Principal Place of Business:

2600 NW 103 ST
MIAMI, FL 33147

Current Mailing Address:

2600 NW 103 ST
MIAMI, FL 33150

New Mailing Address:

2600 NW 103 ST
MIAMI, FL 33147

FEI Number: 20-2355039

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, KENNETH H
3313 W COMMERCIAL BLVD
SUITE 190
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: D () Delete
Name: AROCHO, SANDY
Address: 485 N.W. 88TH TERRACE
City-St-Zip: MIAMI, FL 33150

Title: D () Delete
Name: BUSTOS, LISBETH M
Address: 485 N.W. 88TH TERRACE
City-St-Zip: MIAMI, FL 33150

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SANDY AROCHO

PRES

01/22/2007

Electronic Signature of Signing Officer or Director

_____ Date