2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P05000088400

1. Entity Name

EMPIRE STATE REALTY & INVESTMENTS, INC.



FILED Feb 23, 2007 08:00 AM Secretary of State

Principal Place of Business

28502 SW 163RD CT. MIAMI, FL 33033 Mailing Address

28502 SW 163RD CT. MIAMI, FL 33033



DO NOT WRITE IN THIS SPACE

02202007 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For 20-3093204 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MORGAN, STEPHEN L 28502 SW 163RD CT. MIAMI, FL 33033

DO NOT WRITE IN THIS SPACE

			1	
8. 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. I am familiar with, and accept the obligations of registered agent.				
SIGNATURE.	Signature, typed or printed name of registered agent and title	if applicable (NOTE: Panieta)	ad Apen) signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign f Trust Fund Contribut			ncing \$5.00 May Be	UNIE
10.	OFFICERS AND DIREC	CTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MORGAN, STEPHEN L 28502 SW 163RD CT. MIAMI, FL 33033			03/05/07-80005-012 150.00
TITLE	VP			00,00,01 00000 015 100100
NAME STREET ADDRESS CITY-ST-ZIP	LOPEZ, BELKYS 8641 SW 46TH ST. MIAMI, FL 33155		The state of the s	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 kustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

2/20/07

305-285-8868

Daytime Phone #