## **2006 FOR PROFIT CORPORATION**

## **ANNUAL REPORT** DOCUMENT # P05000092747

FILED Mar 22, 2006 8:00 am Secretary of State

1. Entity Name PROPERTY EXPRESS REAL ESTATE & MORTGAGE COMPANY, INC.						03-22-200	6 90011 00	02 ***15	50.00	
Principal Place of Business			Mailing Address			Ţ ,				
8600 NW SOUTH RIVER DR STE # 229 Medley, Fl 33166			8600 NW SOUTH RIVER DR STE # 229 MEDLEY, FL 33166				orie en	1901 - 2012   2019 of 20	1 MINH BY 1 1 W	
2. Principal Place of Business			3. Mailing Address							
Suite, Apt. #, etc.			Suite, Apt. #, etc.			03152006	Chg-P	CR2E03	4 (11/05)	
City & State			City & State		4. FEI Numbe	56463		_ <del> </del>	plied For ot Applicable	
Zip	Zip Country		Zip Country		<i>f</i>		of Status Desired		8.75 Add ee Require	
6. Name and Address of Current Registered Agent					7. Name and Address of New Registered Agent					
DINCKNE	V CADIO	e ı			Name					
PINCKNEY, CARLOS J 8600 NW SOUTH RIVER DR STE # 229 MEDLEY, FL 33166					Street Address (P.O. Box Number is Not Acceptable)					
					City			FL	Zip Cod	e
The above named entity submits this statement for the purpose of changing its register.					offine or registe		th in the State of E		amiliar with	and assent
	tions of regist		the purpose of changing its	registered	onice or registe	ered agent, or bo	iii, iii iiile state oi r	rionda. Tam ia	arnılal Willi,	and accept
SIGNATURE	Signature, typed	or printed name of registered agent a	nd title if applicable. (NOTE	E: Registered A	Agent signature require	ed when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00  9. Election Campaign Financing Trust Fund Contribution.										
After M	E NOW!!! ay 1, 2000	FEE 18 \$150.00 6 Fee will be \$550.0				5.00 May Be ded to Fees				
After M	ay 1, 2000	FEE IS \$150.00 6 Fee will be \$550.0 OFFICERS AND I	Trust Fund Cont			ded to Fees	CHANGES TO OF			
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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 trustee 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: Carlos J. Pinckney

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

786-337-8099