2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P05000136636



FILED Apr 20, 2007 8:00 am Secretary of State 04-20-2007 90077 044 ***150.00

1. Entity Name ONE STOP REALTY OF KENDALL, INC.								
Principal Place of Business 11410 N. KENDALL DR. SUITE 305 MIAMI, FL 33176		Mailing Address 11410 N. KENDALL DR. SUITE 305 MIAMI, FL 33176		!	KALAMI SEKILASHI ASHI	KARA HIIIR ACINA AHIAR IIKIR AK	10 0 1 (1 400)	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01102007	Chg-P	CR2E034 (12/06)	
City & State		City & State			4. FEI Number 20-35902	240		plied For t Applicable
Zip	Country Zip Cour		Countr	у	5. Certificate of	Status Desired	\$8.75 Add Fee Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Regis								
MIRABAL, MIGUEL F 2828 CORAL WAY SUITE 450 MIAMI, FL 33145				Name Hirabal, Hiquel F Street Address (P.O. Box Number is Not Acceptable)				
MIAMI, FL	33145	වචචච		ଅଧ୍ୟର ୧	oral Wa	y Suite	<u> 530</u>	
				City Hiam	i	`	FL Zip Code	144
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: Registered Agent signature required when reinstating) DATE								
FILE NOWIII FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees								
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/CI	HANGES TO OFFIC	ERS AND DIRECTORS	S IN 11
TITLE	D	☐ Delete	TITLE				☐ Change	Addition
NAME	BEJERANO, SAMUEL		NAME					
STREET ADDRESS CITY-ST-ZIP	11410 N KENDALL DR., SUITE 3	.05	STREET CITY - S	ADDRESS				
	MIAMI, FL 33176	Пол.	TITLE	SI-SIF	 		☐ Change	☐ Addition
TITLE NAME	DAGACH-IMBARACK, LEYLA	☐ Delete	NAME				Criange	Magnitur)
STREET ADDRESS	11410 N KENDALL DR., SUITE 3	05		T ADDRESS				
CITY-ST-ZIP	MIAMI, FL 33176		CITY-S	ST-ZIP				
TITLE		☐ Delete	TITLE				☐ Change	☐ Addition
NAME CAREAL ADDRESS	1		NAME	r address				
STREET ADORESS CITY-ST-ZIP			CITY-S	<u> </u>				
TITLE		☐ Delete	TITLE				☐ Change	Addition
NAME		_ 5500	NAME	ļ			_ •	_
STREET ADDRESS				ADDRESS				
CITY+ST-ZIP			CITY-S	ST-ZIP				
TITLE		☐ Delete	TITLE NAME				Change	Addition
NAME STREET ADDRESS				ADDRESS				
CITY-ST-ZIP			CITY-S	ST-ZIP				
TITLE		☐ Delete	TITLE				Change	Addition
NAME			NAME					İ
STREET ADORESS				ADDRESS				
CITY-ST-ZIP	We also have been a few and the second and the seco	Alaba (Citana da ana ana ana ana ana ana ana ana a	CITY-S		in Chapter 140.	Elosido Ptetutas 17	who positivities the terminate	.tormatica
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 1.19, 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 of 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.								

WID TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: 4