


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 30, 2008 8:00 am
Secretary of State

05-30-2008 90220 030 ***150.00

DOCUMENT # P06000015339 1. Entity Name REAL ESTATE MOGUL'S CORP					
Principal Place of Business 293 MAGICAL WAY KISSIMMEE, FL 34744				Mailing Address 293 MAGICAL WAY KISSIMMEE, FL 34744	
2. Principal Place of Business - No P.O. Box # 2444 CARAVELLE CIR. Suite, Apt. #, etc.		3. Mailing Address 2444 Caravelle Cir Suite, Apt. #, etc.			
City & State Kissimmee FL		City & State Kissimmee, FL		4. FEI Number 01-0860576	
Zip 34746		Country Osceola		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KHAN, AAMIR 293 MAGICAL WAY KISSIMMEE, FL 34744				7. Name and Address of New Registered Agent Name Christ Mathew Street Address (P.O. Box Number is Not Acceptable) 2499 Caravelle Cir. City Kissimmee FL Zip Code 34746	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KHAN, AAMIR 293 MAGICAL WAY KISSIMMEE, FL 34744	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
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 information empowered.					
SIGNATURE: _____ <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
<small>Date Daytime Phone #</small>					

ATTACHMENT

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2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

**** The document number, business name and file date cannot be changed on the report. ****

Document Number P06000015339

Business Entity Name REAL ESTATE MOGUL'S CORP

Original File Date 01/28/2006

FEI Number 01-0860576

Principal Address 293 MAGICAL WAY
KISSIMMEE, FL 34744

Mailing Address 293 MAGICAL WAY
KISSIMMEE, FL 34744

Registered Agent AAMIR KHAN
293 MAGICAL WAY
KISSIMMEE, FL 34744

Officer/Director Name And Address

P
AAMIR KHAN
293 MAGICAL WAY
KISSIMMEE, FL 34744

☒ After May 1 of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if notice was not received.

If all of the above information is correct and If you need to make changes to the above you do not wish to make any changes, information, please select:
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