

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000072945

Entity Name: REALITY REAL ESTATE, INC.

FILED
Jan 08, 2008
Secretary of State

Current Principal Place of Business:

8660 COBBLESTONE POINT CIR
BOYNTON BEACH, FL 33437

New Principal Place of Business:

8660 COBBLESTONE POINT CIR
BOYNTON BEACH, FL 33472

Current Mailing Address:

8660 COBBLESTONE POINT CIR
BOYNTON BEACH, FL 33437

New Mailing Address:

8660 COBBLESTONE POINT CIR
BOYNTON BEACH, FL 33472

FEI Number: 83-0458816

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRUZ, MARIBEL
8660 COBBLESTONE POINT CIR
BOYNTON BEACH, FL 33437 US

Name and Address of New Registered Agent:

CRUZ, MARIBEL
8660 COBBLESTONE POINT CIR
BOYNTON BEACH, FL 33472 US

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:

01/08/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CRUZ, MARIBEL
Address: 8660 COBBLESTONE POINT CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33437

Title: VP () Delete
Name: CRUZ, HECTOR M
Address: 8660 COBBLESTONE POINT CIRCLE
City-St-Zip: PEMBROKE PINES, M 33437

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRUZ, MARIBEL
Address: 8660 COBBLESTONE POINT CIRCLE
City-St-Zip: BOYNTON BEACH, FL 33472

Title: VP (X) Change () Addition
Name: CRUZ, HECTOR M
Address: 8660 COBBLESTONE POINT CIRCLE
City-St-Zip: PEMBROKE PINES, M 33472

I hereby certify that the information supplied with this filing does not qualify 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: MARIBEL CRUZ

P

01/08/2008

Electronic Signature of Signing Officer or Director

Date