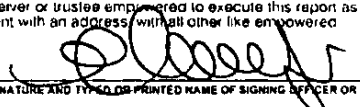


FILED
Aug 17, 2007 8:00 am
Secretary of State

07-23-2007 90038 040 ***155.00

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P06000106905			
1. Entity Name NEWHOUSE REALTY, INC.			
Principal Place of Business 911 N MAIN ST 8 KISSIMMEE, FL 34744		Mailing Address 911 N MAIN ST 8 KISSIMMEE, FL 34744	
2. Principal Place of Business - No P.O. Box # SALE		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
07102007		Chg-P	CR2E034 (12/06)
4. FEI Number 20-5574160		Applied For Not Applicable	
5. Certificate of Status Desired		☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
IBERTIS, EDESIA 911 N MAIN ST 8 KISSIMMEE, FL 34744		Name SALE Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 6 Signature, typed or printed name of registered agent and fee receivable (NOTE: Registered Agent signature required when filing report) DATE			
FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007		9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY ST ZIP	P IBERTIS, EDESIA 911 N MAIN ST KISSIMMEE, FL 34744 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	VP IBERTIS, PABLO 911 N MAIN ST #8 KISSIMMEE, FL 34744 ☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP	☐ Change ☐ 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 like empowered.			
SIGNATURE: 		7-1767 Date Daytime Phone	

ATTACHMENT
66021056
~~#P0600010690~~ -

Kissimmee 07-17-2007

Dear officer

Please accept this check as a payment for the annual
reinstatement fee for my corporation

I never received any notice of the need to filed or pay any
fee

I am sorry for the inconveniece this a very small buisiness

Thank you .


Edesia Ibertis