,2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Apr 30, 2007 8:00 am Secretary of State DOCUMENT # P06000139939 1. Entity Name 04-30-2007 90387 040 ***150.00 FOREVER REALTY, INC. Principal Place of Business Mailing Address 803 S 21 AVENUE 803 S 21 AVENUE HOLLYWOOD FL 33020 HOLLYWOOD FL 33020 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Hollywood Blud. ywood BIVd. Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) 305 305 Ćity & State City & State 4. FEI Number Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired 330 QO 3020 U.S. A Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent LUKIN, FELD-LUKIN, ALICIA Street Address (P.O. Box Number is Not Acceptable) 803 S 21 AVENUE HOLLYWOOD FL 33020 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, typed or printed harne of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 пш Delete шп Addition FELD-LUKIN, ALICIA NAME NAM 2131 Holly wood Blud. Suite#305 803 S 21 AVENUE STREET ADDRESS STREET ADDRESS I HOLLYWOOD FL 33020 CHY-St-7tP CITY - ST-ZIP HILE ☐ Defete 11111 ☐ Change ☐ Addition NAME NAME STREET ADDRESS STRUET ADDRESS CITY-ST-ZIP CITY - ST- ZIP ☐ Addition HILL Delete UHLE Change NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CETY-ST 7/P TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CHY-SI-7IP CITY-SI-ZIE THE Delete Change Addition 11111 NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP ☐ Delete Addition STREET ADDRESS STREET ADDRESS CHY-SI-7IP 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; 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 express, with all other like empowered. SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone

FILED