

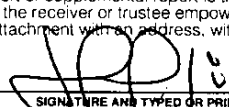


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 31, 2008 8:00 am
Secretary of State

01-31-2008 90030 025 ***150.00

DOCUMENT # P07000025608 1. Entity Name PRIVILEGE REAL ESTATE SERVICES, INC.																																									
Principal Place of Business 9381 SW 52ND TERR. MIAMI, FL 33165			Mailing Address 9381 SW 52ND TERR. MIAMI, FL 33165																																						
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.																																							
City & State Zip Country		City & State Zip Country		4. FEI Number Chg-P CR2E034 (12/06) Applied For Not Applicable																																					
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				6. Name and Address of Current Registered Agent ACOSTA-RUBIO, IGOR 9381 SW 52ND TERR. MIAMI, FL 33165																																					
7. Name and Address of New Registered Agent Name 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:10%;">TITLE</td> <td style="width:70%;">PD</td> <td style="width:20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>ACOSTA-RUBIO, IGOR</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>9381 SW 52ND TERR.</td> <td></td> </tr> <tr> <td>CITY- ST- ZIP</td> <td>MIAMI, FL 33165</td> <td></td> </tr> </table>		TITLE	PD	<input type="checkbox"/> Delete	NAME	ACOSTA-RUBIO, IGOR		STREET ADDRESS	9381 SW 52ND TERR.		CITY- ST- ZIP	MIAMI, FL 33165																									
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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: 																																									
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Daytime Phone #																																					