2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000117763

11055 NW 27TH ST

SUNRISE, FL 33322

Address: City-St-Zip:

Entity Name: GRACE REALTY & CONSULTING INC.

FILED Mar 30, 2009 Secretary of State

		REALT & CONCOLLING, INC.			
Current Pr	rincipal Place	e of Business:	New Principal Place	New Principal Place of Business:	
5544 W OAKLAND PARK BLVD. FORT LAUDERDALE, FL 33313				5544 W OAKLAND PARK BLVD. LAUDERHILL, FL 33313	
Current Ma	ailing Addre	ss:	New Mailing Address	New Mailing Address:	
11055 NW 27 TH ST SUNRISE, FL 33322				5544 W OAKLAND PARK BLVD LAUDERHILL, FL 33313	
FEI Number:	37-1563759	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
ESPERANT, FEQUIERE SR 110 NW 27TH ST SUNRISE, FL 33322 US			5544 W OAKLAND PA	ESPERANT, FEQUIERE SR 5544 W OAKLAND PARK BLVD. LAUDERHILL, FL 33313 US	
The above in the State		submits this statement for the p	urpose of changing its registere	d office or registered agent, or both,	
SIGNATUR	RE:			03/30/2009	
	Electro	nic Signature of Registered Age	ent	Date	
Election Can	npaign Financin	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P (ESPERANT, F 11055 NW 277 SUNRISE, FL	TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP (ESPERANT, R 11055 NW 27 SUNRISE, FL	TH ST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:) Delete ASSANDRA SR	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: FEQUIERE ESPERANT P 03/30/2009