


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 28, 2004 8:00 am
Secretary of State

04-30-2004 90391 050 ****45.00
 06-28-2004 90011 042 ***105.00

54059059



DOCUMENT # P15615			
1. Entity Name PRUDENTIAL REAL ESTATE Affiliates, INC			
Principal Place of Business 3333 MICHELSON DRIVE SUITE 1000 IRVINE, CA 92612		Mailing Address 213 WASHINGTON STREET CORP TURDIV 8TH FL NEWARK, NJ 07102-3777 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 22-2785461		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
8. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
Name CT-CORP SYSTEM 1200 SOUTH PINE ISLAND RD FORT LAUDERDALE, FL 33324		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, 2004 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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME	AC BLUNN, PAUL <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	213 WASHINGTON STREET	STREET ADDRESS	
CITY-ST-ZIP	NEWARK, NJ 07102	CITY-ST-ZIP	
TITLE NAME	AC CAMPEN, DAVID <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	213 WASHINGTON ST	STREET ADDRESS	
CITY-ST-ZIP	NEWARK, NJ 07102	CITY-ST-ZIP	
TITLE NAME	AC CHOTINER, MARTIN <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	213 WASHINGTON ST	STREET ADDRESS	
CITY-ST-ZIP	NEWARK, NJ 07102	CITY-ST-ZIP	
TITLE NAME	AC FIORE, DOMINIC <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	213 WASHINGTON ST	STREET ADDRESS	
CITY-ST-ZIP	NEWARK, NJ 07102	CITY-ST-ZIP	
TITLE NAME	T CHAPLIN, CHARLES E <input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	751 BROAD STREET	STREET ADDRESS	
CITY-ST-ZIP	NEWARK, NJ 071023777	CITY-ST-ZIP	
TITLE NAME	<input type="checkbox"/> Delete	TITLE NAME	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS		STREET ADDRESS	Asst. Comptroller Janice F. Pavlou 213 Washington St. Newark, NJ 07102-2992
CITY-ST-ZIP		CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: <u>Janice Pavlou</u>		Date: <u>1/26/04</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #	

Prudential  **Financial**

*Attachment
Direct # 973-615-615*

The Prudential Insurance Company of America
213 Washington St., Newark, NJ 07102-2992
Tel 973 802-9658 Fax 973 802-5922

54059059

June 8, 2004

CERTIFIED MAIL:

Department of State
Uniform Business Report
Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

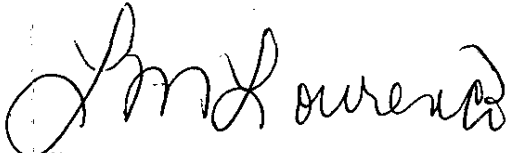
RE: Prudential Real Estate and Relocation Services, Inc.
FILE: 22-2785461

Dear Sirs,

Enclosed please find the Uniform Business Report for Prudential Real Estate and Relocation Services, Inc. along with the filing fee.

If you have any questions please call me at (973) 802-9658.

Sincerely,



Lydia M. Lourenco
Associate Manager, Tax



Attachment

54059059

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 11, 2004

THE PRUDENTIAL REAL ESTATE AFFILIATES, INC.
213 WASHINGTON STREET
CORP TURDIV 8TH FL
NEWARK, NJ 07102-3777 US

Subject: PRUDENTIAL REAL ESTATE AND RELOCATION SERVICES, INC.

Reference Number: P15615

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$45.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

The fee to file the enclosed profit annual report/uniform business report is \$150.00. If a certificate of status is desired, please add an additional \$8.75.

There is a balance due of \$105.00.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

~~If you have additional questions or need further assistance, please call the~~
Division of Corporations at 850-245-6056 and press 4. Your call will be answered in the order it is received.

/mw
ANNUAL REPORTS SECTION