


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 08:00 A
Secretary of State

DOCUMENT # P92000002084
 1. Entity Name
ALL POINTS REALTY & INVESTMENTS INC.



Principal Place of Business Mailing Address
6645 PEMBROKE ROAD **6645 PEMBROKE ROAD**
PEMBROKE PINES, FL 33023 US **PEMBROKE PINES, FL 33023 US**

DO NOT WRITE IN THIS SPACE



04272006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
65-0367985 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
SAMUELS, PATRICK
6465 N.W. 201 STREET
MIAMI, FL 33023

DO NOT WRITE IN THIS SPACE

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

1000001551902
 05/13/06-80119-009 150.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	SAMUELS, PATRICK
STREET ADDRESS	6465 NW 201 STREET
CITY - ST - ZIP	HIALEAH, FL 33015
TITLE	S
NAME	SAMUELS, DWIGHT
STREET ADDRESS	6465 NW 201 STREET
CITY - ST - ZIP	HIALEAH, FL 33015
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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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: *Patrick Samuels* 4-27-06 305-6215800
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #