

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2007 8:00 am
Secretary of State

04-27-2007 90233 001 ***150.00

DOCUMENT # P93000012292

1. Entity Name
H.C.O. REAL ESTATE INVESTMENTS, INC.



Principal Place of Business

923 NW 122ND TERR
NEWBERRY, FL 32669 US

Mailing Address

923 NW 122ND TERR
NEWBERRY, FL 32669 US

2. Principal Place of Business - No P.O. Box #

533 SW 128th Terr

Suite, Apt. #, etc.

3. Mailing Address

533 SW 128th Terr

Suite, Apt. #, etc.

City & State

Newberry, FL

Zip
32669

Country

City & State

Newberry, FL

Zip
32669

Country

04242007

Chg-P

CR2E034 (12/06)

4. FEI Number

59-3165220

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

COHEN, DAVID
923 NW 122ND TERR
NEWBERRY, FL 32669

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D ☐ Delete
NAME COHEN, DAVID
STREET ADDRESS 923 NW 122 TERRACE
CITY-ST-ZIP NEWBERRY, FL 32669

TITLE D ☐ Delete
NAME OARE, ELIZABETH
STREET ADDRESS 15350 AMBERLY DR, #3622
CITY-ST-ZIP TAMPA, FL 33647

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☒ Change ☐ Addition
NAME Cohen, David
STREET ADDRESS 503 SW 128th Terr
CITY-ST-ZIP Newberry, FL 32669

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 #