
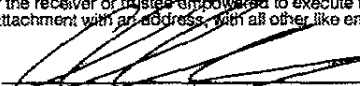


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 11, 2007 08:00 AM
Secretary of State**

DOCUMENT # P93000021734 1. Entity Name DESTINY PROPERTIES AND DEVELOPMENT, INC.		
Principal Place of Business 1101 N LAKE DESTINY RD SUITE 475 MAITLAND, FL 32751	Mailing Address 1101 N LAKE DESTINY RD SUITE 475 MAITLAND, FL 32751	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BLACK, RONALD W 1101 N LAKE DESTINY RD SUITE 475 MAITLAND, FL 32751		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P HIRESH, MITRI M 1101 N. LAKE DESTINY RD., STE 475 MAITLAND, FL 32751	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V HIRESH, MICHELLE 1101 N. LAKE DESTINY RD, STE 475 MAITLAND, FL 32751	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLACK, RONALD W 1101 N. LAKE DESTINY RD STE 425 MAITLAND, FL 32751	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE 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:  Ronald W. Black <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Jan. 8, '07 (407) 682-7700 <small>Date Daytime Phone #</small>



01042007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3176505	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

U00000581968
01/11/07-80013-001 150.00

**DO NOT WRITE
IN THIS SPACE**