2005 FOR PROFIT CORPORATION

May 09, 2005 08:00 AM ANNUAL REPORT **Secretary of State** DOCUMENT # P93000029308 1. Entity Name MEDEROS AND ASSOCIATES REAL ESTATE, INC. Mailing Address Principal Place of Business 9210 S,W, 72 STREET P.O. BOX 521155 MIAMI, FL 33152-1155 US #103 MIAMI, FL 33173 No Cha-P CR2E034 (10/03) 05042005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number Not Applicable 65-0414561 \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent DO NOT WRITE MEDEROS, JORGE C 3410 ANDERSON ROAD IN THIS SPACE CORAL GABLES, FL 33134 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 Signature, lypod or printed name of registered agent and title if applicable 9. Election Campaign Financing \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees corporation did not receive the prior notice. Due by September 7, 2005 OFFICERS AND DIRECTORS 10. TITLE MEDEROS, JORGE C NAME *U00000*364729 3410 ANDERSON RD. STREET ADDRESS 05/09/05-80007-015 150.00 CITY-ST-ZIP CORAL GABLES, FL 33134 TITLE MEDEROS, ZANDRA NAME STREET ADDRESS 3410 ANDERSON RD. CITY-ST-ZIP CORAL GABLES, FL 33134 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling 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:

CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

Daylime Phone #

FILED