


2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 21, 2007 08:00 A
Secretary of State

DOCUMENT # P94000057512	
1. Entity Name A PLUS REALTY, INC.	

Principal Place of Business 11440 OKEECHOBEE RD STE 214 ROYAL PALM BEACH, FL 33411 US	Mailing Address 11440 OKEECHOBEE RD STE 214 ROYAL PALM BEACH, FL 33411 US
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DO NOT WRITE IN THIS SPACE



05182007 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0495360	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**REED, JOHN E
11440 OKEECHOBEE RD STE 214
ROYAL PALM BEACH, FL 33411**

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 *John Reed* JOHN REED DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when renewing)

FILE NOW!!! FEE IS \$550.00 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE D	<p>REED, JOHN E 11440 OKEECHOBEE ROAD, SUITE 214 ROYAL PALM BEACH, FL 33421</p>
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	<p>DO NOT WRITE IN THIS SPACE</p>
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05/31/07-80022-016 558.75

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: *John Reed* JOHN REED 5-16-2007 561 723 4442
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #