

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000060807

**FILED**  
**May 01, 2009**  
**Secretary of State**

**Entity Name:** COMMERCIAL FLORIDA REALTY ADVISORS, INC.

**Current Principal Place of Business:**

450 FAIRWAY DRIVE  
104  
DEERFIELD BEACH, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 810264  
BOCA RATON, FL 334810264

**New Mailing Address:**

450 FAIRWAY DRIVE  
104  
DEERFIELD BEACH, FL 33441

FEI Number: 65-0514021

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SACKS, GEORGE  
4110 NW 24TH AVENUE  
BOCA RATON, FL 33431 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: SACKS, GEORGE  
Address: 4110 NW 24TH AVENUE  
City-St-Zip: BOCA RATON, FL 33431

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE SACKS

PRES

05/01/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date