

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

<b>DOCUMENT # P95000046781</b> 1. Entity Name <b>FLORIDA SUNSET REALTY, INC.</b>			
Principal Place of Business <b>7725 N.W. 146 STREET MIAMI LAKES, FL 33016</b>		Mailing Address <b>7725 N.W. 12 STREET MIAMI LAKES, FL 33016</b>	
2. Principal Place of Business <b>16195 NW 12 ST</b>		3. Mailing Address <b>same</b>	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State <b>Pembroke Pines FL</b>		City & State 	
Zip <b>33028</b>		Country <b>BROWARD</b>	
4. FEI Number <b>65-0880843</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75</b> Additional Fee Required	
6. Name and Address of Current Registered Agent  <b>RAMIREZ, ALBERTO</b> <b>7725 N.W. 12 STREET</b> <b>MIAMI LAKES, FL 33016</b> <i>16195 NW 12 ST. Pembroke Pines, FL 33028</i>		7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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>			
<b>FILE NOW!!! FEE IS \$150.00 Due by September 7, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.			
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>RAMIREZ, LIGIA M</b> <b>16195 NW 12TH STREET</b> <b>PEMBROKE PINES, FL 33028</b> <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>LOPEZ, ROBERT</b> <b>12855 SW 72ND TERRACE</b> <b>MIAMI, FL 33183</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			
Date: <b>9/9/05</b> Daytime Phone #			

50066739



ATTACHMENT 50066739  
P95000046781

Miami, Florida  
September 9, 2005

TO: State of Florida  
Department of Corporations  
Tallahassee, Florida

FROM: Florida Sunset Realty, Inc.  
16195 NW 12 Street  
Pembroke Pines, Fl. 33028

RE: CHANGE ADDRESS – Document No.: P95000046781

Effective immediately, please change our address in your records to:  
**16195 NW 12 Street**  
**Pembroke Pines, Fl 33028**

Old Address: 7725 NW 12 Street, Fl. 33016


Telephone Number, (305) 582-9622

CHANGE OF OFFICERS AND DIRECTORS:  
DELETE: Robert Lopez as Vice President

Please note all these changes have been properly noted on the enclosed 2005 Annual Report, which has been delayed a day since we never got the official Notice from your offices.

Due to this, and according to your office, we have enclosed a check for the Regular \$150.00 filing fee.

Thank you,

  
Alberto Ramirez  
Registered Agent