2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED May 04, 2004 8:00 am Secretary of State

Country Zip Country Zip Country S. Cartificate of Status Desired \$8.75 Administration See Required Street Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable)	DOCUMENT # P96000081201 1. Entity Name SOUTH K. REALTY, INC.						05-04-2004	90118 023	***15	60.00	
Suite, Apt. #, etc. Suite, Apt. #, etc. Only & State On	2750 NW 3RD AVENUE STE 198		2750 NW 3RD AVENUE STE 19B								
City & State Country City	2. Principal Place of Business		3. Mailing Address								
Section Sect	Suite, Apt. #, etc.		Suite, Apt. #, etc.			04302004	Chg-P	CR2E034 (10/03)		
S. Certificate of Status Desired Agent 7. Name and Address of New Registered Agent CHO, SANDY H 2213 NE 123 STREET APT 16 NORTH MIAMI, FL 33181 City FL Zip Code 8. The above named entity submits this statement for the purpose of changing its registered diffice or registered agent, or both, in the State of Flonds. I am familiar with, and soot the obligations of registered agent, or both, in the State of Flonds. I am familiar with, and soot the obligations of registered agent. SIGNATURE FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITIE PSD CHO, SANDY H STREET ADDRESS CITY-51-2P NORTH MIAMI, FL 33181 ORTH-51-2P NORTH MIAMI, FL 33181 Delete 110. OFFICERS AND DIRECTORS 111. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ORTH-51-2P NORTH MIAMI, FL 33181 ORTH-51-2P ORT	City & State		City & State			j.	227	***************************************	_	plied For t Applicable	
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B. The above named entity submits this statement for the purpose of changing its registered office or registered eigent, or both, in the State of Florida. I am familiar with, and according to the obligations of registered agent. SIGNATURE Signate speed or present name of injuremed agent and size if applicable. (NOTE Registered Agent separative returned when rentationg) After May 1, 2004 Fee will be \$550.00 PSD OFFICERS AND DIFFECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS IN 11 ITILE PSD CHO, SANDY H SIRET ADDRESS CITY-ST-ZP NORTH MIAMI, FL 33181 Delete TILE				<u> </u>				,			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP 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 informatic	STREET ADDRESS City-St-Zip		□ Delete	STREET A CITY-ST-	ZIP					Addition	

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 efficer 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 I I if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/04

Daytime Phone #