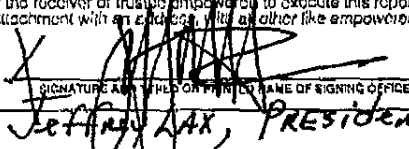


**2005 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Apr 04, 2005 08:00 AM
Secretary of State

DOCUMENT # P96000102621		
1. Entity Name REAL ESTATE CAPITAL PARTNERS, INC.		
Principal Place of Business 1950 S OCEAN DR SUITE 4P HALLANDALE, FL 33009		Mailing Address 8181 W. BROWARD BLVD STE 255 PLANTATION, FL 33324
DO NOT WRITE IN THIS SPACE		
		03302005 No Chg-P CR2E034 (10/03)
4. FEI Number 65-0719333		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fees Required
6. Name and Address of Current Registered Agent BENNETT, KEITH CPA 8181 W BROWARD BLVD STE 255 PLANTATION, FL 33324		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 _____ Signature, typed or print of name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE _____		
FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PVST LAX, JEFFREY M 1950 S OCEAN DR, SUITE 4P HALLANDALE, FL 33009	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D LAX, JEFFREY 1950 S OCEAN DR, SUITE 4P HALLANDALE, FL 33009	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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:  _____ Jeffrey Lax, President		3/31/05 954 522-3888 Date Daytime Phone