2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 01, 2004 8:00 am Secretary of State 03-01-2004 90038 050 ***159.00

DOCUMENT # P9700004143 1. Entity Name FLORIDA IMOVEIS INTERNATIONAL REALTY, INC.



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NORTH MIAMILERACH, EL 33160 US NORTH MIAMILERACH, EL 33160 US Sulle, Apr. 4, etc. Sults Apr. 4, etc. O2002004 ChgP CR28504 (10/05) City A State City A State A. FET Number of Selection of S	Principal Place	of Business	Mailing Address							
2. Principal Place of Business Suite. Apt. F. etc. Applied For Country Applied For Country Applied For Country Suite. Apt. F. etc. Applied For Country Suite. Apt. F. etc. Suite. Apt. F. etc. Applied For Country Suite. Apt. F. etc. Suite. Apt. Suite. Apt. Etc. Suite. Apt. F. etc. Suite. Apt	18407 W. Dixi North Miami.	E HIGHWAY BEACH, FL 33160 US		BEACH, FL 331					540	13551
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Second S	Suite, Apt. #, etc.		Suite, Apt. #, e	Suite, Apt. #, etc.			Chg-P	CR2E03	34 (10/03)	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent 19810 NR 26TH AVE MIAMI, FL 33160 City FL Zip Code	City & State		City & State			•				
Name Street Address (P.O. Box Number is Not Acceptable)	Zip	Country	Zip	Cour	ntry	5. Certificate c	of Status Desired			
EDISIO, SAMPAIO IDSIO NE 26 TH AVE MIAMI, FL 33180 City FL Zip Code 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, year or present craims of registered agent and the aboveries. MOST: Registered Apert signature may not man an international grades agent and the aboveries. MOST: Registered Apert signature may not man an international grades. FILE NOWILL FEE IS \$150,000 After May 1, 2004 Fee will be \$550,000 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 INITE OPST MAMMINE, DEST MAMMINE, 33180 ORT \$1.20 THE MANKE SIRET MORES ORT \$1.20 ORDER HAME ORDER MAMMINE, 33180 ORT \$1.20 ORDER HAME ORDER ORDER ORDER HAME ORDER ORDER ORDER HAME ORDER ORDER		6. Name and Address of Currer	nt Registered Agent	····	N	7. Name and A	Address of New I	Registered A	gent	
B. 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. Common	19610 NE 26TH AVE					(P.O. Box Number	is Not Acceptable	le)		
SIGNATURE Signature, Luport or printed name of ingolational agent out fills it appointment Agent signature required Agent signature required when rentatively) DATE					City			FL	Zip Code	3
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.			for the purpose of cha	anging its registe	red office or registe	ered agent, or both	n, in the State of F	lorida. I am f	amiliar with,	and accept
After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ITILE DPST	SIGNATURE_s	lignature, typed or printed name of registered age	ent and title if applicable.	(NOTE: Register	red Agent signature require	ed when reinstaling)		DATE		
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daylime Phone #		URE:	<u> </u>				Date		aylime Phone #	