## 2007 FOR PROFIT CORPORATION

## **ANNUAL REPORT** DOCUMENT # P97000013029 1. Entity Name FLORIDA NATIONAL REAL ESTATE & INVESTMENTS,



Principal Place of Business

676 WEST PROSPECT ROAD FORT LAUDERDALE, FL 33302 Mailing Address

676 WEST PROSPECT ROAD FORT LAUDERDALE, FL 33302

## **FILED** Apr 23, 2007 8:00 am Secretary of State

04-23-2007 90103 049 \*\*\*150.00

4001001



04092007 DO NOT WRITE IN THIS SPACE

04092007	No Chg-P	CR2E034 (11/05)		
4. FEI Number	· · · · · · · · · · · · · · · · · · ·		Applied For	
59-1024	1691		Not Applicable	
5. Certificate of	of Status Desired		\$8.75 Additional	

Daytime Phone #

6. Name and Address of Current Registered Agent

MARCUS, JOEL 676 WEST PROSPECT ROAD FORT LAUDERDALE, FL 33302

SIGNATURE: \_

## 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 printed name of registered agent and title it	applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE.		
FILE NOWILL FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9. Election Campaign Finance Trust Fund Contribution.			ing	\$5.00 May Be Added to Fees			
10.	OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCUS, JOEL 676 WEST PROSPECT ROAD FORT LAUDERDALE, FL 33302						
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY+ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental @oprt 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 AND TOPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR