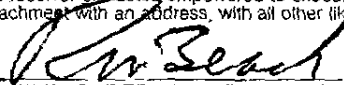


2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 08:00 AM
Secretary of State

DOCUMENT # P97000015626 1. Entity Name BEST BUYER BROKER REALTY, INC.																																																																																																																													
Principal Place of Business 1881 NE 26TH ST # 212 WILTON MANORS FL 33305			Mailing Address 1881 NE 26TH ST # 212 WILTON MANORS FL 33305																																																																																																																										
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.																																																																																																																										
City & State			City & State																																																																																																																										
Zip		Country		4. FEI Number 65-0730465																																																																																																																									
5. Certificate of Status Desired ☐				Applied For Not Applicable																																																																																																																									
6. Name and Address of Current Registered Agent BEACH, RICHARD 1721 ROOSEVELT STREET HOLLYWOOD FL 33020				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City																																																																																																																									
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 _____ (NOTE: Registered Agent signature required when incorporating)																																																																																																																													
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State																																																																																																																													
9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																																																																																																													
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="text-align: left;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="text-align: left;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</th> </tr> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 40%;">☐ Delete</td> <td style="width: 15%;">TITLE</td> <td style="width: 45%;">NAME</td> <td style="width: 40%;">☐ Change ☐ Add</td> </tr> <tr> <td>STREET ADDRESS</td> <td>BEACH, RICHARD</td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>1721 ROOSEVELT STREET HOLLYWOOD FL 33020</td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td>☐ Delete</td> <td>TITLE</td> <td></td> <td>☐ Change ☐ Add</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table>						10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Add	STREET ADDRESS	BEACH, RICHARD		STREET ADDRESS			CITY-ST-ZIP	1721 ROOSEVELT STREET HOLLYWOOD FL 33020		CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Add	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Add	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Add	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP			TITLE		☐ Delete	TITLE		☐ Change ☐ Add	NAME			NAME			STREET ADDRESS			STREET ADDRESS			CITY-ST-ZIP			CITY-ST-ZIP		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11																																																																																																																										
TITLE	NAME	☐ Delete	TITLE	NAME	☐ Change ☐ Add																																																																																																																								
STREET ADDRESS	BEACH, RICHARD		STREET ADDRESS																																																																																																																										
CITY-ST-ZIP	1721 ROOSEVELT STREET HOLLYWOOD FL 33020		CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Add																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Add																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Add																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
TITLE		☐ Delete	TITLE		☐ Change ☐ Add																																																																																																																								
NAME			NAME																																																																																																																										
STREET ADDRESS			STREET ADDRESS																																																																																																																										
CITY-ST-ZIP			CITY-ST-ZIP																																																																																																																										
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: 																																																																																																																													
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR																																																																																																																													
3/23/06 954																																																																																																																													