2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005
Secretary of State

DOCUMENT# P97000017560

Entity Name: ABRAM LEWKOWICZ REALTY, INC.

Current Principal Place of Business:

3061 EXETER D
BOCA RATON, FL 33434 US

New Principal Place of Business:

437 GOLDEN ISLES DR.
HALLANDALE, FL 33309 US

Current Mailing Address:

3061 EXETER D
#16
BOCA RATON, FL 33434 US

New Mailing Address:

437 GOLDEN ISLES DR.
HALLANDALE, FL 33309 US

FEI Number: 65-0829647 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEWKOUIEZ, ABRAM
3061 EXETER D
BOCA RATON, FL 33434 US

Name and Address of New Registered Agent:

LEWKOWICZ, ABRAM
437 GOLDEN ISLES DR.
HALLANDALE, FL 33309 US

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.

SIGNATURE: ABRAM LEWKOWICZ 03/16/2005
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEWKOWICZ, ABRAM
Address: 3061 EXETER D
City-St-Zip: BOCA RATON, FL 33434 US

Title: V (X) Delete
Name: LEWKAUEZ, MIRIAN
Address: 3061 EXETER D
City-St-Zip: BOCA RATON, FL 33434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEWKOWICZ, ABRAM
Address: 437 GOLDEN ISLES DR.
City-St-Zip: HALLANDALE, FL 33309 US

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ABRAM LEWKOWICZ PRES 03/16/2005
Electronic Signature of Signing Officer or Director Date