

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000028299

FILED
Apr 09, 2008
Secretary of State

Entity Name: ALBUQUERQUE PROPERTIES, INC.

Current Principal Place of Business:

1020 NW 62ND ST
FT LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

PO BOX 81200
ALBUQUERQUE, NM 87198

New Mailing Address:

FEI Number: 59-3451854

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REYES, KEELY W
1020 NW 62ND ST
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: REYES, KEELY W
Address: PO BOX 81200
City-St-Zip: ABQ, NM 87198

Title: D () Delete
Name: WHITTINGTON, NERISSA
Address: PO BOX 81200
City-St-Zip: ABQ, NM 87198

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: REYES, KEELY W
Address: PO BOX 81200
City-St-Zip: ALBUQUERQUE, NM 87198

Title: D (X) Change () Addition
Name: WHITTINGTON, NERISSA
Address: PO BOX 81200
City-St-Zip: ALBUQUERQUE, NM 87198

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: NERISSA WHITTINGTON

D

04/09/2008

Electronic Signature of Signing Officer or Director

Date