2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000031816

Entity Name

SOUTH FLORIDA REALTY AND INVESTMENTS, INC.



US

FILED
Mar 29, 2004 08:00 AM
Secretary of State

Principal Place of Business

Mailing Address

1160 KANE CONCOURSE

1160 KANE CONCOURSE

301

BAY HARBOR, FL 33154 | 1

BAY HARBOR, FL 33154

No Chg-P

CR2E034 (10/03)

4. FEI Number 65-0743006

03252004

Applied For Not Applicable

5. Certificate of Status DesIred

\$8.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PORNPRINYA, TONY 10800 BISCAYNE BLVD, SUITE 988 MIAMI, FL 33161

DO NOT WRITE IN THIS SPACE

		}		
	named entity submits this statement for the $\mathfrak p$ ions of registered agent.	urpose of changing its registered office or registered	d agent, or both, in the State of Florida. I am familiar with, and accept	:
SIGNATURE	Signature, typed or printed name of registered agent and title	if applicable (NOTE, Registered Agent signature required with	when rehasiting) DATE	
	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.00		00 May Be d to Fees	
10.	ÖFFICERS AND DIREC	TORS		_
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARUCH-COTO, LEA 1160 KANE CONCOURSE 301 BAY HARBOR, FL 33154	——————————————————————————————————————		

TITLE D

NAME BARUCH-COTO, LEA

STREIT ADDRESS
CITY-ST-ZIP BAY HARBOR, FL 33154

DTLE VP

NAME COTO, RUBEN A

STREET ADDRESS
CITY-ST-ZIP BAY HARBOR ISLANDS, FL 33154

TITLE

NANE
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

U00000097865 03/29/04-80017-023 150.00

DO NOT WRITE IN THIS SPACE

IN THIS SPACE

12. Thereby certify that the information supplied with this filling does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of 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 adoptess, with all other like empowered.

SIGNATURE

TITLE
NAME
STREET ADDRESS
GITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
STREET ADDRESS
STREET ADDRESS
STREET ADDRESS

GRANTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/05/04. (305) 866-9976.