

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000031816

FILED
Feb 10, 2005
Secretary of State

Entity Name: SOUTH FLORIDA REALTY AND INVESTMENTS, INC.

Current Principal Place of Business:

1160 KANE CONCOURSE
301
BAY HARBOR, FL 33154 US

New Principal Place of Business:

Current Mailing Address:

1160 KANE CONCOURSE
301
BAY HARBOR, FL 33154 US

New Mailing Address:

FEI Number: 65-0743006 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

PORNPRINYA, TONY
10800 BISCAYNE BLVD, SUITE 988
MIAMI, FL 33161 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: BARUCH-COTO, LEA
Address: 1160 KANE CONCOURSE 301
City-St-Zip: BAY HARBOR, FL 33154

Title: VP () Delete
Name: COTO, RUBEN A
Address: 1160 KANE CONCOURSE 301
City-St-Zip: BAY HARBOR ISLANDS, FL 33154

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: LEA BARUCH-COTO

D

02/10/2005

Electronic Signature of Signing Officer or Director

_____ Date