2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000035016*

NADÉR REALTY & INVESTMENTS, INC.



Principal Place of Business

665 HAROLD AVE WINTER PARK, FL 32789 Mailing Address

665 HAROLD AVE

WINTER PARK, FL 32789

FILED Jun 21, 2005 8:00 am Secretary of State

06-21-2005 90001 029 ***550.00



CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

03282005	No Chg-P	CR2E034 (10/03)		
4. FEI Number			Applied For	
59-3443870			Not Applicable	
•		**		

\$8.75 Additional 5. Certificate of Status Desired Fee Required

NADER, MICHAEL A. 665 HAROLD AVE

DO-NOT-WRITE

WINTER PARK, FL 32/89				IN THIS SPACE			
	The party					,	
	named entity submits this statement for the priors of registered agent.	urpose of changing its re	gistered o	office or re	egistered agent, or bo	oth, 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: R	egistered Ag	ent signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Trust Fund Contribu			9 🗆	\$5.00 May Be Added to Fees			
10.	. OFFICERS AND DIREC	TORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD NADER, MICHAEL A 665 HAROLD AVE WINTER PARK, FL 32789						
TITLE	VSD						
NAME	– –						
STREET ADDRESS	1 3 3 7 11 2 7 11 2						
CITY-ST-ZIP	WINTER PARK, FL 32789						
TITLE NAME STREET ADDRESS CIFY-ST-ZIP					DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	- · · · · · · · · · · · · · · · · · · ·				IN.	THIS SPACE	
TIFLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby i	certify that the information supplied with this fill	no does not qualify for th	e evemn	tion state	Lin Section 119 07/3	(i) Florida Statutes I further certify that the information	

composed in 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 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 attachmental made and the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute and that my name appears in Block 10 or Block 11 if changed, or on an attachmental made and the same legal effect as if made under oath; that I am an officer or director of the corporation of the corporat

SIGNATURE: