2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000035027

13951 NW 8TH STREET

SUNRISE, FL 33325

Address: City-St-Zip:

Entity Name: MOR REAL ESTATE INVESTMENTS, INC.

FILED Jul 19, 2005 Secretary of State

•					
Current Pr	incipal Plac	e of Business:	New Principal Place of	New Principal Place of Business:	
13951 NW 8 STREET			10601 STATE STREET		
SUNRISE,	FL 33325		SUITE 1 TAMARAC, FL 33321		
Current Mailing Address:			New Mailing Address:	New Mailing Address:	
13951 NW	8 STREET		10601 STATE STREET		
SUNRISE,	FL 33325	US	SUITE 1	LIC	
			TAMARAC, FL 33321	US	
FEI Number:	65-0755754	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of I	Name and Address of New Registered Agent:	
ONE PARK 621 NW 53 BOCA RAT	(PLACE RD STREETON, FL 334 named entity		ourpose of changing its registered o	office or registered agent, or both,	
SIGNATUR		onic Signature of Registered Age	ant .	 Date	
				Date	
		193(2)(b), F.S., the corporation did no ng Trust Fund Contribution ().	t receive the prior notice.		
	AND DIRE		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	D () Delete	Title: () Change ()Addition	
Name:	GOLDSTEIN,		Name:	, s. a.i.g.s (). i.a.i.i.si.	
Address:	13951 NW S		Address:		
City-St-Zip:	SUNRISE, FL	33325	City-St-Zip:		
Title:) Delete	Title: () Change ()Addition	
Name:	LUTTINGER,,	RICHARD	Name:		
Address:	13951 NW 8		Address:		
City-St-Zip:	SUNRISE, FL	33325	City-St-Zip:		
Title:) Delete	Title: () Change () Addition	
Name:	LUTTINGER,	OWEN	Name:		

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.

Address:

City-St-Zip:

SIGNATURE: OWEN LUTTINGER PRES 07/19/2005