2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 08, 2006 08:00 AM Secretary of State

959-450-5426 Dayline Phone 8

DOCUMENT # P9700061787 1. Enlity Name FAIR PRICE PROPERTIES I, INC.					Secre	cary or State	
Principal Place of Business Mailing Address 195 SW 166TH AVE. PEMBROKE PINES, FL 33027 PEMBROKE PINES, FL 33027				{ NE (8 E E E E	1 (1708 (1808 280) 880) 880)	I A MARINA MARKAN INTAN INTANA SANSI INTANA SANSA SI SANSI	
DO NOT WRITE IN THIS SPAC				02172006 4. FEI Numb 65-076	02172006 No Chg-P		
5. Name and Address of Current Registered Agent							
MARTINEZ, CARLOS M. 195 SW KOG AVENUE PEMBROKE PINES, FL 33027			DO NOT WRITE IN THIS SPACE				
8. 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. It am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or pointed name of registered agent and title of applicable. INDIE: Registered Agent signature required when reinstating? DATE							
FILE NOWIII FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution.				\$5.00 May Be Added to Fees		_	
TO. TITCE NAME SIREET ADDRESS CITY-ST-2IP TITLE NAME	D MARTINEZ, CARLOS M 195 SW 166TH AVE. PEMBROKE PINES, FL 33027	CTORS			03/18/ 0 6	0458960 -80008-004 150.80	
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					NOT W		
NAME STREET ADDRESS CITY-ST-ZIP				IN T	this sp	ACE	
Dire Name Street address City - St - Zip						. •	
HITLE HAME STREET ADDRESS CHY-ST-ZIP							
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 118, 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 attachment with an address, with all other like empowered.							

SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: _