


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 27, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000065836**  
 1. Entity Name  
**STIER REALTY, INC.**



Principal Place of Business      Mailing Address  
**620 NORTH WEST 76TH TERRACE**      **620 NORTH WEST 76TH TERRACE**  
**PLANTATION, FL 33324**                      **PLANTATION, FL 33324**

**DO NOT WRITE IN THIS SPACE**



03242008    No Chg-P    CR2E034 (11/05)

4. FEI Number <b>65-0770512</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>

6. Name and Address of Current Registered Agent  
**STIER, SAM**  
**620 NORTH WEST 76TH TERRACE**  
**PLANTATION, FL 33324**

**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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2008 Fee will be \$850.00**

9. Election Campaign Financing: Trust Fund Contribution.        **\$5.00 May Be Added to Fees**

000000871447  
 04/09/08-80131-004 150.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D STIER, SAM 620 NW 76 TERR PLANTATION, FL 33324
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 filers empowered.

SIGNATURE: *Sam Stier*      3/25/08      954 2615681  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #