2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000078262

City-St-Zip:

Entity Name: OCEANSIDE REALTY, INC.

FILED Apr 19, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3211 PONCE DE LEON BLVD., STE. 301 CORAL GABLES, FL 33134 **Current Mailing Address: New Mailing Address:** 3211 PONCE DE LEON BLVD., STE. 301 CORAL GABLES, FL 33134 FEI Number: 65-0788281 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARKER, REX M 3211 PONCE DE LEON BLVD., STE. 301 CORAL GABLES, FL 33134 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DPST () Delete Title: DPST (X) Change () Addition Name: MILTON, FRANK Name: MILTON, FRANK P 3211 PONCE DE LEON BLVD., STE. 301 3211 PONCE DE LEON BLVD., STE. 301 Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: CORAL GABLES, FL 33134 () Delete Title: () Change (X) Addition Title: Name: Name: MILTON, CECIL 3211 PONCE DE LEON BLVD STE301 Address: Address: CORAL GABLES, FL 33134 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change (X) Addition MILTON, JOSEPH Name: Name: 3211 PONCE DE LEON BLVD STE 301 Address Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US Title: () Delete Title: VΡ () Change (X) Addition GIL, YOSI Name: Name: Address: Address: 3211 PONCE DE LEON BLVD STE 301

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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.

City-St-Zip:

CORAL GABLES, FL 33134 US

SIGNATURE: FRANK MILTON Ρ 04/19/2006