

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90073 007 ***150.00

DOCUMENT # P98000018762

1. Entity Name

NATIONAL REAL ESTATE DEVELOPMENT, INC.



Principal Place of Business

420 LINCOLN ROAD
STE 443
MIAMI BEACH FL 33139
US

Mailing Address

P.O. BOX 191768
MIAMI FL 33119-1768
US

2. Principal Place of Business

420 Lincoln Road

3. Mailing Address

P. O. Box 191769

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 2D

City & State

Miami Beach, FL

City & State

Miami, FL

Zip
33139

Country
Dade

Zip
33119-1679

Country
Dade

4. FEI Number

65-0892362

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PLC INVESTMENTS, INC.
420 LINCOLN ROAD
STE 443
MIAMI BEACH FL 33139

Name

Street Address (P.O. Box Number is Not Acceptable)
420 Lincoln Road, Suite 2D

City

Miami Beach,

FL

Zip Code
33139

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CEJAS, PABLO L 420 LINCOLN RD PENTHOUSE MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST MONTERO, HILDA C 420 LINCOLN RD STE 443 MIAMI BEACH FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CEJA, PAUL L 420 LINCOLN RD STE 443 MIAMI BEACH FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CEJAS, GERTIE 420 LINCOLN RD STE 443 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	420 Lincoln Road, Suite 2D Miami Beach, FL 33139	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Cejas, Paul L. 420 Lincoln Road, Suite 2D Miami Beach, FL 33139	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Vice President Rodriguez, Sandra 420 Lincoln Road, Suite 2D Miami, Beach, FL 33139	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing 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 attachment with an address, with all other like empowered.

Hilda C. Montero, Secretary

SIGNATURE:

Hilda C. Montero
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/04
Date

305-531-5220
Daytime Phone #