2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000024089

Entity Name: ISLAND ESTATES REAL ESTATE SERVICES, INC.

FILED Feb 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

TWO ISLANDS DRIVE 2750 NE MIAMI GARDENS DRIVE AVENTURA, FL 33160

SUITE 300

AVENTURA, FL 33160

Current Mailing Address: New Mailing Address:

2750 NE MIAMI GARDENS DRIVE P O BOX 601011 NORTH MIAMI BEACH, FL 33160

SUITE 300

AVENTURA, FL 33160

FEI Number: 65-0827788 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:

SCHNEIDER, HARVEY R SCHNEIDER, HARVEY ESQ. 1900 CORPÓRATE BLVD, SUITE 301-WEST 2750 NE MIAMI GARDENS DRIVE BOCA RATON, FL 33431 SUITE 300

AVENTURA, FL 33160 US

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: HARVEY SCHNEIDER 02/10/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: **PVST** () Delete

Name: COHEN, GARY

3901 ISLAND ESTATES DR Address:

City-St-Zip: AVENTURA, FL 33160

Title: () Delete

COHEN, GARY Name:

3901 ISLAND ESTATES DR Address:

AVENTURA, FL 33160 City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: **PVST** (X) Change () Addition

Name: COHEN, GARY

2750 NE MIAMI GARDENS DRIVE, STE 300 Address:

City-St-Zip: AVENTURA, FL 33160

Title: (X) Change () Addition

Name: COHEN, GARY

Address: 2750 NE MIAMI GARDENS DRIVE, STE 300

AVENTURA, FL 33160 City-St-Zip:

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.

SIGNATURE: GARY COHEN 02/10/2005 D