

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000042826

FILED  
Apr 21, 2009  
Secretary of State

Entity Name: REAL ESTATE INVESTMENT & MANAGEMENT SYSTEMS, INC.

**Current Principal Place of Business:**

C/O REIMS, LLC  
425 W. 41 STREET  
MIAMI BEACH, FL 33140 US

**New Principal Place of Business:**

**Current Mailing Address:**

C/O REIMS, LLC  
P.O. BOX 6481  
SURFSIDE, FL 33154

**New Mailing Address:**

FEI Number: 65-0840243      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ARAN CORREA GUARCH & SHAPIRO, P.A.  
255 UNIVERSITY DR  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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:**

Title: D ( ) Delete  
Name: NEVAREZ, RICARDO A  
Address: P. O. BOX 5916  
City-St-Zip: SURFSIDE, FL 33154

Title: V ( ) Delete  
Name: NEVAREZ, ALICIA E  
Address: 4601 NW 36TH STREET  
City-St-Zip: MIAMI, FL 33166

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: NEVAREZ, ALICIA E  
Address: 845 UNITED NATIONAL PLAZA  
City-St-Zip: NEW YORK, NY 10017

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

SIGNATURE: CHARLOTTE ALEMAN

ACCT

04/21/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date