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FILED Jul 10, 2006 08:00 AN Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P9800009 1. Entity Name FLORIDA GROUP REALTY, INC.	54290			·	
Principal Place of Business 10113 SW 72 STREET MIAMI, FL 33173	Malling Address 8770 SUNSET DR., #373 MIAMI, FL 33173				
DO NOT WRITE IN THIS SPACE 6. Name and Address of Current Registered Agent			07052006 No Chg-P CR2E034 (11/05) 4. FEI Number		
FERNANDEZ, PABLO J 8770 SUNSET DR #373 MIAMI, FL 33173		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 Signature, typed or proted name of registered agent and itself applicable (KOTE Registered Agent agreature required when remnisting). DATE					
FILE NOW!!! FEE IS \$150.00 Due by Soptember 6, 2006	9. Election Campaign Finar Trust Fund Contribution.	ncing\$5.	.00 May Be	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AN TITLE D NAME STREET ADDRESS CITY-SI-ZIP MIAMI, FL 33173 TITLE NAME STREET ADDRESS CITY-SI-ZIP TOTAL	ID DIRECTORS			U00000568641 07/10/06~80002-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE MAME - STREET ADDRESS	PESS		DO NOT WRITE IN THIS SPACE		
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP					
NAME STREET ADDRESS CITY-ST-219 12 Increhy certify that the information sunded w	ith this filling does not qualify for the over	mplions postelect	in Chanter 110	Florido Statutos further confliction and information	
12. I hereby certify that the information supplied with this filing does pot qualify for the exemptions contained in Chapter 119. Florida Statutas, I further certify that the information indicated on this report or supplymental report is true and accupite 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 kustee empowered to execute this report as required by Chapter 507, 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 fike ampowered. SIGNATURE: SIGNATURE AND TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					