

# 2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P98000055533

Entity Name: R.E. PROPERTIES OF N.E. FL, INC.

FILED  
Jan 30, 2007  
Secretary of State

## Current Principal Place of Business:

5605 FORT SUMTER ROAD  
JACKSONVILLE, FL 32210

## New Principal Place of Business:

2406 SEGOVIA AVE  
JACKSONVILLE, FL 32217

## Current Mailing Address:

2406 SEGOVIA AVE  
JACKSONVILLE, FL 32217

## New Mailing Address:

FEI Number: 59-3522770

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SAFAR, EDMOND  
2406 SEGOVIA AVE.  
JACKSONVILLE, FL 32217 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: EDMOND SAFAR

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPST ( ) Delete  
Name: SAFAR, EDMOND  
Address: 5605 FORT SUMTER ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

Title: DV ( ) Delete  
Name: SAFAR, LOUSIA  
Address: 5605 FORT SUMTER ROAD  
City-St-Zip: JACKSONVILLE, FL 32210

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: SAFAR, EDMOND  
Address: 2406 SEGOVIA AVE  
City-St-Zip: JACKSONVILLE, FL 32217

Title: DV (X) Change ( ) Addition  
Name: SAFAR, LOUSIA  
Address: 2406 SEGOVIA AVE  
City-St-Zip: JACKSONVILLE, FL 32217

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.

SIGNATURE: EDMOND SAFAR

Electronic Signature of Signing Officer or Director

PR

01/30/2007

Date