

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000055940

Entity Name: CASSEL REALTY, INC.

FILED
Jan 14, 2008
Secretary of State

Current Principal Place of Business:

1801 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Principal Place of Business:

814 PONCE DE LEON BLVD.
SUITE 319
CORAL GABLES, FL 33134 US

Current Mailing Address:

1801 PONCE DE LEON BLVD.
CORAL GABLES, FL 33134

New Mailing Address:

814 PONCE DE LEON BLVD.
SUITE 319
CORAL GABLES, FL 33134 US

FEI Number: 65-0844910

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COSTA, HELEN
COSTA AND ASSOCIATES, PA
7330 W-20TH AVE
MIAMI, FL 33016 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: RODRIGUEZ, CASSANDRA E
Address: 1801 PONCE DE LEON BLVD
City-St-Zip: CORAL GABLES, FL 33134

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: RODRIGUEZ, CASSANDRA E
Address: 814 PONCE DE LEON BLVD, SUITE 319
City-St-Zip: CORAL GABLES, FL 33134

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: CASSANDRA E. RODRIGUEZ

D

01/14/2008

Electronic Signature of Signing Officer or Director

_____ Date