


**2006 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 28, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # P98000078289 1. Entity Name "JOSHUA" REALTY & INVESTMENTS, INC.	
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Principal Place of Business 832 N JOHN ST S ORLANDO, FL 32808	Mailing Address 832 N JOHN ST S ORLANDO, FL 32808
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04272006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0978839	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  HARRISON, MICHAEL A 1773 GLENHAVEN CIR. OCOEE, FL 34761
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2006 Fee will be \$550.00**

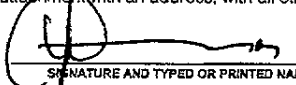
9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P HARRISON, MICHAEL A 1773 GLENHAVEN CIR. OCOEE, FL 34761
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD HARRISON, DEBBIE G 2934 E. MISSIONWOOD CIR MIRAMAR, FL 33025
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP HARRISON, MIKE 1773 GLENHAVEN CIR. OCOEE, FL 34761
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 05/10/06-80003-023 158.75

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **MICHAEL A. HARRISON** 4-26-2006 407 822-3908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #