

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 15, 2007 8:00 am
Secretary of State

02-15-2007 90048 041 ***158.75

DOCUMENT # P98000078289

1. Entity Name

"JOSHUA" REALTY & INVESTMENTS, INC.



Principal Place of Business

832 N JOHN ST
ORLANDO, FL 32808

Mailing Address

832 N JOHN ST
ORLANDO, FL 32808

DO NOT WRITE IN THIS SPACE



02022007 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0978839

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARRISON, MICHAEL A
1773 GLENHAVEN CIR.
OCOE, FL 34761

**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 printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution.



\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE P
NAME HARRISON, MICHAEL A
STREET ADDRESS 1773 GLENHAVEN CIR.
CITY-ST-ZIP OCOEE, FL 34761

TITLE SD
NAME HARRISON, DEBBIE G
STREET ADDRESS 2934 E. MISSIONWOOD CIR
CITY-ST-ZIP MIRAMAR, FL 33025

TITLE VP
NAME HARRISON, MIKE
STREET ADDRESS 1773 GLENHAVEN CIR.
CITY-ST-ZIP OCOEE, FL 34761

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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
MICHAEL A. HARRISON

2-5-2007 407-822-3908

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #