

# **2004 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P98000080591

**FILED**  
**Oct 26, 2004**  
**Secretary of State**

**Entity Name:** COMMERCIAL PROPERTY ANALYSTS, INC.

**Current Principal Place of Business:**

2052 NE 120TH ROAD  
NORTH MIAMI, FL 33181

**New Principal Place of Business:**

214 BRAZILIAN AVENUE  
SUITE 200  
PALM BEACH, FL 33480

**Current Mailing Address:**

2052 NE 120TH ROAD  
NORTH MIAMI, FL 33181

**New Mailing Address:**

214 BRAZILIAN AVENUE  
SUITE 200  
PALM BEACH, FL 33480

**FEI Number:** 65-0031852

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

EVANS, LESLIE ESQ  
214 BRAZILIAN AVE.  
STE. 200  
PALM BEACH, FL 33480 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

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: P ( ) Delete  
Name: BOAN, JOSEPH M  
Address: 214 BRAZILIAN AVE., STE 200  
City-St-Zip: PALM BEACH, FL 33480

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOSEPH BOAN

P

10/26/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date