2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 28, 2005 08:00 AM Secretary of State

ANNUAL	ANNUAL REPORT			Secretary of State			
DOCUMENT # P99000027947 1. Entity Name				56	li etai y	oi State	
1302 SOUTH FEDERAL REALTY CO	DRP,						
Principal Place of Business 1302 S FEDERAL HWY DANIA, FL 33004	Mailing Address 20281 E COUNTRY CLUB DR #1401 AVENUTRA, FL 33180			A TOTAL CASA GAZA DASA AN	44 88718 4887 18 8 18 581	// #id// (4#/##/ Af 18#/	
DO NOT WRITE IN THIS SPAC			04202005	No Chg-P	CR2E034 (*	(0/03)	
		_	4. FEI Numbe 65-103	4513	60	Not Applicable 75 Additional	
6. Name and Address of Current	Posietered Agent	<u> </u>	5. Certificate	of Status Desired		7 a Additional Required	
	The state of Agent	·					
GOLDMAN, JEROME E 1001 N FEDERAL HWY., SUITE 201		DO NOT WRITE					
HALLANDALE, FL 33009		<u> </u>	ר או	THIS SF	PACE		
8. The above named entity submits this statement for	the purpose of changing its register	ed office or register	ed agent, or bot	h, in the State of Flo	orida. I am famili	ar with, and accept	
the obligations of registered agent.							
SIGNATURE Signature, typed or printed name of registered agent of	and title if applicable. (NOTE Registere	d Agen) signature required	when reinstating)		DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.		ncing \$5.	00 May Be ed to Fees				
10. OFFICERS AND	DIRECTORS		 				
TITLE D NAME BLOOM, MARTIN	•						
STREET ADDRESS 20281 E COUNTRY CLUB DR. # CITY-ST-ZIP AVENTURA, FL 33180	1401						
TITLE NAME STREET ADDRESS				04/28/05	033 (6)(U 00005-00	7 150.00	
CITY-ST-ZIP	,	1					
NAME :	•						
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NAME STREET ADDRESS]					
CITY-ST-ZIP		}					
NAME							
STREET ADDRESS CITY-ST-ZIP							
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12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation of 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 either tike empowered.

SIGNATURE:

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

4/2/05

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