

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000035301

FILED
Jan 04, 2005
Secretary of State

Entity Name: PLACES REALTY INCORPORATED

Current Principal Place of Business:

501 CONTINENTAL PLAZA
3250 MARY STREET
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

307 CONTINENTAL PLAZA
3250 MARY STREET
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 65-0920734

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CRONIG, STEVEN C ESQ.
307 CONTINENTAL PLAZA
3250 MARY STREET
COCONUT GROVE, FL 33133 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: BERMAN, DANA
Address: 3250 MARY ST. #308
City-St-Zip: COCONUT GROVE, FL 33133

Title: D () Delete
Name: CRONIG, STEVEN
Address: 3250 MARY ST. #307
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D/VP (X) Change () Addition
Name: BERMAN, DANA
Address: 3250 MARY ST. #501
City-St-Zip: COCONUT GROVE, FL 33133

Title: D/P (X) Change () Addition
Name: CRONIG, STEVEN
Address: 3250 MARY ST. #307
City-St-Zip: COCONUT GROVE, FL 33133

Title: D/S () Change (X) Addition
Name: SCHWARTZ, DAREN A
Address: 3250 MARY ST. #501
City-St-Zip: COCONUT GROVE, FL 33133

Title: D/T () Change (X) Addition
Name: SUKOFF, IRA
Address: 3250 MARY ST. #501
City-St-Zip: COCONUT GROVE, FL 33133

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: STEVEN C. CRONIG

D.P

01/04/2005

Electronic Signature of Signing Officer or Director

_____ Date