2007 FOR PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # P99000037919 LUXURY ESTATES ONLINE, INC. Principal Place of Business Mailing Address

FILED Apr 19, 2007 08:00 Al Secretary of State



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

400 AVENUE B

MELBOURNE BEACH, FL 32951

03302007 No Chg-P CR2E034 (11/05) Applied For 4 CCI Number

_	90-0132452		Not Applicable
5.	Certificate of Status Desired	\$8.75 Additional Fee Required	

GARY LANE, POWER OF ATTORNEY 400 AVE B

400 AVE B

MELBOURNE BEACH, FL 32951

DO NOT WRITE

MELBOURNE BEACH, FL 32951		IN THIS SPACE			
8. The above named entity submits this statement for the the obligations of registered agent	purpose of changing its registered off	ice or re	egistered agent, or be	oth, in the State of Florida. I am familiar with, and accept	
Signature Signature, typed or printed name of registered agent and little	if applicable (NOTE Registered Agent	t signature	required when reinstating)	DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10. OFFICERS AND DIRE	CTORS				
TITLE PTS NAME WILLIAMS, MARIBOB STREET ADDRESS 400 AVENUE B CITY-S1-ZIP MELBOURNE BEACH, FL 32951					
TITLE NAME STREET ADDRESS CITY-ST-ZIP				U00000716699 5 04/30/07-80019-001 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY- ST- ZIP .					
TITLE NAME STREET ADDRESS DITY-ST-ZIP 12. I hereby certify that the information supplied with this to			· ·		

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: G. Some, G. Lane,	P.O.A.	4/16/07	321-725-480	1
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date	Daytime Phone #	