


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2007 08:00 AM
Secretary of State

DOCUMENT # P99000068835

1. Entity Name
FIRST UNION REALTY INVESTMENTS CORP.



Principal Place of Business
P.O BOX 402283
MIAMI BEACH, FL 33140

Mailing Address
P.O BOX 402283
MIAMI BEACH, FL 33140

DO NOT WRITE IN THIS SPACE



04032007 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0972306

Applied For
Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

EXPOSITO, SIGMUND
5500 COLLINS AVENUE SUITE 1401
MIAMI BEACH, FL 33160

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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)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$350.00**

9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be Added to Fees

000000719948
05/01/07-80085-010 158.75

10. OFFICERS AND DIRECTORS

TITLE	STD
NAME	EXPOSITO, ANA J
STREET ADDRESS	P.O BOX 402283
CITY-ST-ZIP	MIAMI BEACH, FL 33140
TITLE	PD
NAME	EXPOSITO, SIGMUND
STREET ADDRESS	P.O BOX 402283
CITY-ST-ZIP	MIAMI BEACH, FL 33140
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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date: 4/16/07 Daytime Phone # _____