## 2007 FOR PROFIT CORPORATION

## Apr 12, 2007 08:00 A Secretary of State **ANNUAL REPORT DOCUMENT # P99000081227** MORLIN REALTY GROUP, INC. Principal Place of Business Mailing Address 5414 N.W. 72ND AVE. 5414 N.W. 72ND AVE. MIAMI, FL 33166 MIAMI, FL 33166 01122007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-1021859 Not Applicable Fee Required 6. Name and Address of Current Registered Agent FELLMAN, SETH DO NOT WRITE 5414 NW 72 AVE. MIAMI, FL 33166 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when rainstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 ich File Nowill Fee is \$150.00 --- After May 1, 2007 Fee will be \$550.00... Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME FELLMAN, SETH H U00000701620 5414 NW 72ND AVE STREET ADDRESS 04/20/07-80065-011 150:00 MIAMI, FL 33166 CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this fill indicated on this report or supplemental report is true and the corporation or the receiver or trustee empowered to does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information of accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director 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,

SIGNATURE:

CITY-ST-7IP TOUR NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**