

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 16, 2007 08:00 AM**  
**Secretary of State**

DOCUMENT # P99000101129

1. Entity Name  
FIRST WAY REALTY SERVICES INC.



Principal Place of Business

10661 N. KENDALL DR  
STE 100  
MIAMI, FL 33176

Mailing Address

10661 N. KENDALL DR  
STE 100  
MIAMI, FL 33176



01122007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-0962453

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

VELEZ, EUGENIO  
13005 S.W. 143RD TERR.  
MIAMI, FL 33186

**DO NOT WRITE  
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)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be**  
**Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
ST  
SANMIGUEL, MARGARITA  
STREET ADDRESS  
13005 SW 143RD TERR  
CITY-ST-ZIP  
MIAMI, FL 33186

TITLE  
NAME  
PD  
VELEZ, EUGENIO  
STREET ADDRESS  
13005 SW 143RD TERR  
CITY-ST-ZIP  
MIAMI, FL 33186

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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TITLE  
NAME  
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CITY-ST-ZIP

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01/17/07-80040-016 150.00

**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

Daytime Phone #