


**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 26, 2006 8:00 am**  
**Secretary of State**

04-26-2006 90191 049 \*\*\*158.75

<b>DOCUMENT # P99000109007</b> 1. Entity Name CMG REALTY INVESTMENTS, INC.	
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Principal Place of Business C/O MICHAEL DOIKOS 13904 BENTLEY CR FORT MYERS, FL 33912	Mailing Address C/O MICHAEL DOIKOS 13904 BENTLEY CR FORT MYERS, FL 33912
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**DO NOT WRITE IN THIS SPACE**



04242006 No Chg-P CR2E034 (11/05)

4. FEI Number 65-0967708	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75</b> Additional Fee Required-	

6. Name and Address of Current Registered Agent

DOIKOS, MICHAEL  
13904 BENTLEY CR  
FORT MYERS, FL 33912

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00</b> May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOIKOS, MICHAEL 13904 BENTLEY CR FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST DOIKOS, ROSALIE 14440 OLD HICKORY BLVD. FT. MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DOIKES, GEORGE 14440 OLD HICKORY BLVD. FT. MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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:** George Doikos 4/24/06 George Doikos 237-791-0011  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #