


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 08:00 AM
Secretary of State

DOCUMENT # S41385
 1. Entity Name
DUVAL REALTY INVESTORS, INC.



Principal Place of Business 1002 SHERBROOKE ST. W., SUITE 2625 MONTREAL, QUEBEC, H3A 3L6 CANADA, XX	Mailing Address 1002 SHERBROOKE ST. W., SUITE 2625 MONTREAL, QUEBEC, H3A 3L6 CANADA, XX
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04122005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0282357	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 MAYERS, ALEXANDER
 2121 N OCEAN BLVD
 APT 1007-E
 BOCA RATON, FL 33431

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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____
Signature, typed or printed name of registered agent and title if applicable.

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

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

11111000313322
 04/18/05-80118-010 150.00

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAYERS, ALEXANDER 2121 N. OCEAN BLVD. BOCA RATON, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARTNER, MICHAEL 104 WINDMILL CRESCENT MONTREAL, CA
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: M. Gartner MICHAEL GARTNER APRIL 12/05 514-845-0241
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #