


**2008 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 21, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # S87549</b> 1. Entity Name A TO Z REAL ESTATE, INC.	
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Principal Place of Business 900 WASHINGTON ST HOLLYWOOD, FL 33019	Mailing Address P.O. BOX 85277 HALLANDALE, FL 33008-5277
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**DO NOT WRITE IN THIS SPACE**



01112008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3089768	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

BEGGS, WILLIAM F  
 2929 E COMMERCIAL BLVD  
 PENTHOUSE A  
 FT LAUDERDALE, FL 33308

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

**FILE NOW!!! FEE IS \$160.00**  
**After May 1, 2008 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 STREET ADDRESS CITY-ST-ZIP	D BARROS, ARNALDO 62 W 47 ST 801-803 NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARROS, MARIA 62 W 47 ST 801-803 NEW YORK, NY
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COSTA, SOPHIA 62 W 47 ST 801-803 NEW YORK, NY
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 02/29/08-80015-005 150.00

**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:** Maria Barros MARIA BARROS 2-15-08 646765-9054  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #