
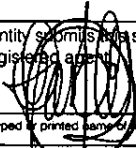
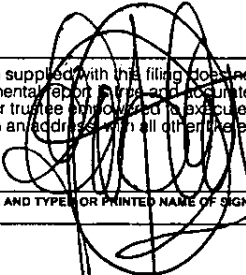


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 03, 2007 8:00 am**  
**Secretary of State**

05-03-2007 90058 042 \*\*\*150.00

<b>DOCUMENT # V14923</b> 1. Entity Name <b>INTERINVESTMENTS REALTY, INC.</b>					
Principal Place of Business <b>730 NW 107 AVE #120 MIAMI, FL 33172 US</b>			Mailing Address <b>730 NW 107 AVE #120 MIAMI, FL 33172 US</b>		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		05012007 Chg-P CR2E034 (12/06)	
4. FEI Number <b>65-0315699</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>			<b>7. Name and Address of New Registered Agent</b>		
<b>CARDENAL, EMILIO, JR. 950 N.W. 106 AVE. CIRCLE MIAMI, FL 33172</b>			Name <b>Emilio CARDENAL JR.</b> Street Address (P.O. Box Number is Not Acceptable) <b>730 NW 107th AVE #120</b> City <b>Miami</b> <b>FL</b> Zip Code <b>33172</b>		
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 <b>4/30/07</b>	
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reuniting)					
<b>FILE NOW!!! FEE IS \$150.00 After May 1, 2007 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		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>CARDENAL, EMILIO, JR. 950 N.W. 106 AVE. CIRCLE MIAMI, FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director Emilio Cardenal Jr. 730 NW 107th AVE #120 Miami, FL 33172</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <input type="checkbox"/> Delete <b>CARDENAL, JAVIER EUGENIO 950 N.W. 106 AVE. CIRCLE MIAMI, FL</b>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Director JAVIER Cardenal 730 NW 107th AVE #120 Miami, FL 33172</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 the empowered.					
SIGNATURE: 				DATE <b>4/30/07</b> <b>305-220-1101</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					