

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000123531

FILED
Jan 18, 2005
Secretary of State

Entity Name: ALL FLORIDA REALTY & INVESTMENT, INC.

Current Principal Place of Business:

1190 N.E 125 STREET
SUITE #11
N.MIAMI, FL 33162

New Principal Place of Business:

822N.E 125 STREET
SUITE #107
N.MIAMI, FL 33161

Current Mailing Address:

580 N.W 126 STREET
N.MIAMI, FL 33168

New Mailing Address:

FEI Number: 34-2012879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ESCARDANT, MODIRA
580 N.W 126 STREET
N.MIAMI,FL, FL 33168 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ESCARMANT, MODIRA
Address: 580 N.W 126 STREET
City-St-Zip: N.MIAMI, FL 33168

Title: VP () Delete
Name: ESCARMANT, RUTH
Address: 580 N.W 126 STREET
City-St-Zip: N.MIAMI, FL 33168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MODIRA ESCARMANT

P

01/18/2005

Electronic Signature of Signing Officer or Director

_____ Date