2004 FOR PROFIT CORPORATION

SIGNATURE

Jan 23, 2004 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #651025** 01-23-2004 90013 011 ***150.00 1. Entity Name COMREAL MIAMI, INC. Principal Place of Business Mailing Address 8725 N.W. 18TH TERRACE, SUITE #105 8725 N.W. 18TH TERRACE, SUITE #105 MIAMI, FL 33172 MIAMI, FL 33172 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 01052004 Chg-P Applied For City & State 4. FEI Number, City & State 59-1955574 Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name SMITH, STEPHEN H. Street Address (P.O. Box Number is Not Acceptable) 8725 N.W. 18TH TERRACE SUITE 105 MIAMI, FL 33172 Zip Code 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE SMITH, STEPHEN H. NAME NAME STREET ADDRESS STREET ADDRESS 8725 N.W. 18TH TERRACE, #105 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33172 ÝP., TOTO SOUSE S HEINE, J.L. III TITLE ... Delete · · · · NAME NAME -STREET ADDRESS STREET ADDRESS 8725 NW 18 TER, #105 CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL 33172 ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME REDLICH, EDWARD J NAME STREET ADDRESS 8725 NW 18TH TERRACE #105 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33172 CITY-ST-ZIP ☐ Change ☐ Addition TITLE 🛛 Delete TITLE LAPRADD, WESTLEY SCOTT NAME STREET ADDRESS 8725 NW 18TH TERRACE #105 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33172 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS 法遗居 (红蓝) CITY-ST-ZIP 12.: I hereby certify that the information supplied with this filing does not qualify 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 thermy 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 true empowered to execute this report as reported 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.

FILED

Daytime Phone #