2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 26, 2002 8:00 am Secretary of State **DOCUMENT # 759171** 1. Entity Name SUNSET ISLANDS PROPERTY OWNERS, INC. 02-26-2002 90053 009 ****61.25 Principal Place of Business Mailing Address 1510 WEST 27TH STREET CAROL TOWLE MIAMI BEACH FL 33140 1510 WEST 27TH STREET MUMMI BEACH FL 33140 2. Principal Place of Business 3. Mailing Address 2535 LAKE AVENUE 2535 LAKE AVENUE Neil Dubrow Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For MIAMI BEACH 59-0794782 BEACH PL N/AMI Not Applicable Country Country \$8.75 Additional 33140 5. Certificate of Status Desired USA $U \circ A$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TOWLE, CAROL 1510 WEST 27TH STREET MIAMI BEACH FL 33140 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. SIGNATURE red agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 DP TITLE ☐ Delete TITLE Change ☐ Addition SHARPSTEIN, JANICE NAME NAME STREET ADDRESS 1435 WEST 27TH ST STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP Delete TITLE ☐ Change **Addition GELB. GLADYS** NAME Neil Dy Brow NAME 2805 LAKE AVE STREET ADDRESS STREET ADDRESS 2535 Lake Avenue CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP Miami Beach Fl 33140 TITLE ☐ Delete TITLE ☐ Change ☐ Addition DAN, CAROL NAME NAME 1635 W 27 STREET STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BCH FL 33140 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition PETERSON, ELLEN NAME NAME 2560 SUNSET DR STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI BEACH FL 33140 CITY-ST-ZIP TITLE Delete Change ☐ Addition HERTZBERG, ROBERT NAME NAME STREET ADDRESS 1601 NORTH VIEW DR STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33140 CITY-ST-ZIP TITLE 🗶 Delete TITLE ☐ Change ☐ Addition ELEGANT, IRA NAME NAME STREET ADDRESS 1360 W 29TH ST STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33140 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 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 617, 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: