


**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 24, 2007 8:00 am**  
**Secretary of State**

04-24-2007 90004 032 \*\*\*150.00

DOCUMENT # P01000054063					
1. Entity Name DUPONT PROPERTY HOLDING, INC.					
Principal Place of Business 605 LINCOLN RD 5TH FLOOR MIAMI BEACH, FL 33139		Mailing Address 605 LINCOLN RD 5TH FLOOR MIAMI BEACH, FL 33139			
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 04-3670418	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LAZAR, BRUCE E 605 LINCOLN RD 5TH FLOOR MIAMI BEACH, FL 33139			7. Name and Address of New Registered Agent		
			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2007 Fee will be \$550.00</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD	<input type="checkbox"/> Delete	TITLE	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LOWENSTEIN, ALFREDO		NAME	VIA GUIDNIO SUP. 13 STABILE 701	
STREET ADDRESS	9G-1 EST. NAZARETH		STREET ADDRESS	APT 301-6 PARADISO	
CITY-ST-ZIP	ST THOMAS, VI 00802		CITY-ST-ZIP	LUGANO, TICINO 6900 SWITZERLAND	
TITLE	VS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LAZAR, BRUCE E		NAME		
STREET ADDRESS	605 LINCOLN RD 5TH FLOOR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP		
TITLE	VD	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LOWENSTEIN, DIEGO		NAME		
STREET ADDRESS	605 LINCOLN RD. 5TH FLOOR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	COONEY, JOHN W		NAME		
STREET ADDRESS	605 LINCOLN RD 5TH FLOOR		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP		
TITLE	AS	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	MATHIA, JUDITH L		NAME		
STREET ADDRESS	605 LINCOLN RD. 5TH FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP		
TITLE	DV	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
NAME	LOWENSTEIN-BOANO, PAULA		NAME		
STREET ADDRESS	605 LINCOLN RD. 5TH FL		STREET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH, FL 33139		CITY-ST-ZIP		
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 employees.					
SIGNATURE _____			Date _____ Daytime Phone # _____		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date _____ Daytime Phone # _____		

40070130



04062007 Chg-P CR2E034 (12/06)

4. FEI Number 04-3670418 Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

7. Name and Address of New Registered Agent  
 Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City  
 FL Zip Code

9. Election Campaign Financing Trust Fund Contribution.  \$5.00 May Be Added to Fees

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11  
 Change  Addition  
 VIA GUIDNIO SUP. 13 STABILE 701  
 APT 301-6 PARADISO  
 LUGANO, TICINO 6900 SWITZERLAND

SIGNATURE \_\_\_\_\_  
 DIEGO LOWENSTEIN  
 VP  
 4/19/07 305532-1215

# ATTACHMENT

40078743

APRIL 19, 2007

ATTACHMENT TO DOCUMENT #

P01000054063

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## Directors and Officers

D/P

Alfredo Lowenstein  
Via Guidnio Superiore 13, Stabile 701  
Apt 301-6 Paradiso  
Lugano, Ticino 6900 SWITZERLAND

D/V

Diego Lowenstein  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139

D/V

Paula Lowenstein-Boano  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139

D/V

Flavia Lowenstein-Elortegui  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139

D/V

Carla Lowenstein  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139

V/S

Bruce E. Lazar  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139

V

John W. Cooney  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139

AS

Judith L. Mathia  
605 Lincoln Road – 5<sup>th</sup> Floor  
Miami Beach, FL 33139