

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000061541

FILED
Jan 02, 2007
Secretary of State

Entity Name: WATERHOUSE MANAGEMENT PROPERTIES, INC

Current Principal Place of Business:

8603 S. DIXIE HWY, SUITE 211
MIAMI, FL 33143

New Principal Place of Business:

5810 COMMERCE LANE
SOUTH MIAMI, FL 33143

Current Mailing Address:

8603 S. DIXIE HWY, SUITE 211
MIAMI, FL 33143

New Mailing Address:

5810 COMMERCE LANE
SOUTH MIAMI, FL 33143

FEI Number: 65-1115515

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SMOLER, BRUCE J
2611 HOLLYWOOD BLVD
HOLLYWOOD, FL 33020 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: PD () Delete
Name: DE LEON, CARLOS
Address: 5860 SW 87 STREET
City-St-Zip: MIAMI, FL 33143

Title: VPS () Delete
Name: ZOSMAN, OFER
Address: 11012 SW 80 AVENUE
City-St-Zip: MIAMI, FL 33156

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 Chapter 119, 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: CARLOS DELEON

PD

01/02/2007

Electronic Signature of Signing Officer or Director

_____ Date