2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2004 8:00 am Secretary of State

DOCUMENT # P03000075160 1. Entity Name ECCLESTON INVESTMENTS, INC.						04-29-2004 90313 044 ***150.00				
Principal Place of Business 150 WEST FLAGLER STREET SUITE 2200 MIAMI, FL 33130		Mailing Address 150 WEST FLAGLER STREET SUITE 2200 MIAMI, FL 33130					(U. 24 00 1 714) 		[
2. Principal Pl	ace of Business	3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			04262004	Chg-P	CR2E0	34 (10/03)		
City & State		City & State			4. FEI Number	-0844	15/1		plied For at Applicable	
Zip	Country	Zip Coun		try	5. Certificate	of Status Desired		\$8.75 Addi Fee Required		
	6. Name and Address of Current		Name	7. Name and	Address of New I	Registered /	\gent			
FREED, O' 150 WEST SUITE 220 MIAMI, FL	FLAGLER STREET 0		Street Address		(P.O. Box Numb	er is Not Acceptable	le)			
				City			FL	Zip Code	e	
the obligat	named entity submits this statement for ions of registered agent. Signature, typed or printed name of registered agent		E: Registered	d Agent signature require	od when reinstating)	th, in the State of Fi	lorida. I am	familiar with,	and accept	
FIL After Ma	E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$550.			Add	ded to Fees					
10. TITLE	OFFICERS AND	DIRECTORS Delete	11. TITLE		ADDITIONS	CHANGES TO OF	FICERS AND	DIRECTORS Change	S IN 11	
NAME STREET ADDRESS CITY-ST-ZIP	MARTINEZ, ARMANDO Y 19234 FISHER ISLAND DRIVE MIAMI BEACH, FL 33109	LJ Dejete	NAMI STRE					Change	<u> </u>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DE YANEZ, GABRIELA G 19234 FISHER ISLAND DRIVE MIAMI BEACH, FL 33109	☐ Delete					,	☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD 'YANEZ, MARIA'M 19234 FISHER ISLAND DRIVE MIAMI BEACH, FL 33109	☐ Delete		l l	7 444.50	Mark Water parame	م مست م	☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD YANEZ, ALAJANDRO 19234 FISHER ISLAND DRIVE MIAMI BEACH, FL 33109	☐ Delete	1	j				☐ Change	Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FREED, OWEN S 150 WEST FLAGLER STREET MIAMI, FL 33130	☐ Delete	1	1				☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		1				☐ Change	Addition	
12. I hereby indicated of the color changed	certify that the information supplied wit on this report or supplemental report poration or the receiver or trustee grap, or on an attachment with an address	1140		mption stated in S ture shall have the red by Chapter 60		, ,	/	rtify that the ir am an officer in Block 10 or		