2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

1. Entity Nam	MENT # S89107 PROP HOLDINGS, INC.	_ •.			Mar 21, 2005 0 Secretary of	
Principal Place of Business Mailing Address 1326 N OCEAN BLVD C/O R LOWMAN PALM BCH FL 33480 240 CRANDON BLVD #202 US KEY BISCAYNE FL 33149 US US						1111 1110(411 11 1110)
2. Principal Place of Business 3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc			1st MOORE CR2E034 (10/04	1)
City & Stat	е	City & State			4. FEI Number 65-0293512	Applied For Not Applicable
Zip Country		Zip			5. Certificate of Status Desired	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name		
SALA, A. ROSEMARY 328 CRANDON BLVD SUITE 202				Street Address (P.O. Box Number is Not Acceptable)		
KEY	' BISCAYNE FL 33149			City	FL Zip	Code
8. The above the obligat	named entity submits this statement ions of registered agent. Signalura, lyped or printed name of registered age	<u>-</u> .		d Agent signature require	ered agent, or both, in the State of Florida. I am famillar	with, and accept
After	ILE NOW!!! FEE IS \$150.00 May 1, 2005 Fee Will Be \$550.0 Payable to Florida Department	of State			Trust Fund Contribution.	\$5.00 May Be Added to Fees
10.	OFFICERS ANI	DOURECTORS Delete	11.		ADDITIONS/CHANGES TO OFFICERS AND DIREC	
NAME STREET ADDRESS CITY ST-ZIP	GRAND, JOHN W. 1326 N OCEAN BLVD PALM BCH FL 33480	relete	NAM! STRE	1	U00000271726 03/21/05-80058-024 1	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			☐ Cha	inge Addition
NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			□ Cha	nge Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete			☐ Cha	inge 🔲 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			☐ Cha	nge
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			Cha	inge 🗌 Addition
of the cor	certify that the information supplied wi on this report or supplemental report poration or the <u>receiver</u> or thistee em or on an attachment with an address	powered to execute this repo	ort as requi	mption stated in Se ture shall have the red by Chapter 60	ection 119.07(3)(i), Florida Statutes. I further certify that same legal effect as if made under oath, that I am an of 17, Florida Statutes, and that my name appears in Block	the information fficer or director 10 or Block 11 if

OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED