2005 FOR PROFIT CORPORATION **ANNUAL REPORT**

Secretary of State DOCUMENT # V48447 01-27-2005 90044 007 ***150.00 COLONIAL INVESTMENT PROPERTIES, INC. 40001040 Principal Place of Business Mailing Address 8603 S. DIXIE HWY 8603 S. DIXIE HWY MIAMI, FL 33143 MIAMI, FL 33143 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01252005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 65-0344442 Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARCIA, MARGARITA F. Street Address (P.O. Box Number is Not Acceptable) 8603 S. DIXIE HWY, STE 208 MIAMI, FL 33143 Zip Code FL 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. 1-21-05. SIGNATURE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 . Trust Fund Contribution. ☐ _ Added to Fees After May 1, 2005 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE Delete PRESIDENT Change GENARO GARCIA GARCIA, GENARO R NAME NAME 8603 5. DIXIE HWY #208 STREET ADDRESS 6800 SW 57TH TERR STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33143 CITY+ST-ZIP MIAMI, FL 33143 ☐ Change ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-7IP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE □ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ■ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CITY - ST - 78P TILLE ☐ Addition ☐ Delete ☐ Channe TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP+1

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 eath; that I am an officer or director of the corporation or the receiver of trustee empowered to execute this proport as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapted or on an attachment of the maddless, with all other like empowered.

of the corporation or the received

SIGNATURE:

FILED Jan 27, 2005 8:00 am