2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

APPROVED AND FILED

07 JUN 21 PM 2:40

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

pes

DOCUMENT # P97000054661

1. Entity Name
657-685 WASHINGTON AVE., PROPERTY, INC.

Principal Place of Business	Mailing Address
3191 CORAL WAY SUITE 1008 MIAMI, FL 33145	3191 CORAL WAY SUITE 1008 MIAMI, FL 33145

06192007 Chg-P CR2E034 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0762782 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
STONE, DAVID E 3191 CORAL WAY SUITE 1008 MIAMI, FL 33145	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is $61.25

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

400105416862
07/03/07--01057--009 **183.75

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P STONE, DAVID E 3191 CORAL WAY, SUITE 1008 MIAMI, FL 33145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SVP VIVES, GRACE 3191 CORAL WAY, SUITE 1008 MIAMI, FL 33145	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/VP/S/T Vives, Grace 3191 Coral Way, Suite 1008 Miami, FL 33145	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D/VP Sostchin, Henrietta 3191 Coral Way, Suite 1008 Miami, FL 33145	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Percal, Enrique 3191 Coral Way, Suite 1008 Miami, FL 33145	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Percal, Ida 3191 Coral Way, Suite 1008 Miami, FL 33145	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Sostchin, Dana 3191 Coral Way, Suite 1008 Miami, FL 33145	☐ Change ☒ Addition

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 empowered.

SIGNATURE: _____ Grace Vives 6/19/2007 (305)477-7267
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #