

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000078933

Entity Name: EQUITY ONE ACQUISITION CORP.**Current Principal Place of Business:**1600 NE MIAMI GARDENS DR
NORTH MIAMI BEACH, FL 33179**Current Mailing Address:**1600 NE MIAMI GARDENS DR
NORTH MIAMI BEACH, FL 33179 US**FEI Number:** 14-1855377**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 US*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**Officer/Director Detail :**

Title CEOD
Name LUKES, DAVID
Address 410 PARK AVENUE
 SUITE 1220
City-State-Zip: NEW YORK NY 10022

Title COO
Name MAKINEN, MICHAEL
Address 410 PARK AVENUE
 SUITE 1220
City-State-Zip: NEW YORK NY 10022

Title VPT
Name OSTROWER, MATTHEW
Address 410 PARK AVENUE
 SUITE 1220
City-State-Zip: NEW YORK NY 10022

Title VP
Name CHOQUETTE, KEN
Address 1600 NE MIAMI GARDENS DRIVE
City-State-Zip: NORTH MIAMI BEACH FL 33179

Title P
Name CAPUTO, THOMAS
Address 410 PARK AVENUE
 SUITE 1220
City-State-Zip: NEW YORK NY 10022

Title DVPS
Name KITLOWSKI, AARON
Address 410 PARK AVENUE
 SUITE 1220
City-State-Zip: NEW YORK NY 10022

I hereby 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 all other like empowered.

SIGNATURE: AARON KITLOWSKI**SECRETARY****02/21/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date