2001 UNIFORM BUSINESS REPORT (UBR)

FILED Mar 16, 2001 8:00 am **DOCUMENT # 386319** Secretary of State 1. Entity Name PRUDENT PROPERTY MANAGERS, INC. 03-16-2001 90064 033 ***150.00 Mailing Address Principal Place of Business 2301 COLLINS AVE SUITE M-14 2301 COLLINS AVE SUITE M-14 MIAM! FL 33139 MIAMI FL 33139 DUNTSON 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For 4. FFI Number City & State City & State 59-1399710 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent H. Hildebrandt mark HILDEBRANDT, SANFORD Street Address (P.O. Box Number is Not Acceptable) 2301 COLLINS AVE. STE M14 300-71 Street, Suite 302 City Miami Beach FL 39. MIAMI BCH, FL 33139 nits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida 8. The above named entity sub MARK H. HILDEBRANDT name of registered agent and title if applicable FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible \$5.00 May Be 10. Flection Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. ☐ Addition Change PD TITLE □ Delete TITLE HILDEBRANDT, SANFORD NAME NAME 300-71st street, Suite 302 STREET ADDRESS 2301 COLLINS AVE, STE M14 STREET ADDRESS Miami Beach, FL 33141 CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH FL 🗹 Change ☐ Addition TITLE Delete TITLE HILDEBRANDT, LOIS NAME NAME 300-71st Street, Suite 302 Miami Beach, FL 33141 STREET ADDRESS STREET ADDRESS 2301 COLLINS AVE, STE M14 CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH FL ☐ Addition □ Delete TITI F TITI F 300-71st street, Suite 302 Miami Beach, FL 33141 HILDEBRANDT, MARK H NAME NAME STREET ADDRESS 2301 COLLINS AVE, STE M14 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BCH FL ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. 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 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 11 or Block 12 if changed, or on an attachment with an officer, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: