

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 408069

FILED
Mar 25, 2005
Secretary of State

Entity Name: QUAIL ROOST PROPERTIES, INC.

Current Principal Place of Business:

11222 QUAIL ROOST DR
MIAMI, FL 33157

New Principal Place of Business:

Current Mailing Address:

11222 QUAIL ROOST DR
ATTN: CORPORATE PLANNING
MIAMI, FL 33157

New Mailing Address:

FEI Number: 59-1414202 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEVY, GUSTAVO
Address: 11222 QUAIL ROOST DR.
City-St-Zip: MIAMI, FL 33157

Title: VD () Delete
Name: GUTIERREZ, MANOLA
Address: 11222 QUAIL ROOST DR.
City-St-Zip: MIAMI, FL 33157

Title: D () Delete
Name: LAMNIN, ADAM
Address: 11222 QUAIL ROOST DRIVE
City-St-Zip: MIAMI, FL

Title: ASD () Delete
Name: HEGGEN, ARTHUR
Address: 11222 QUAIL ROOST DR.
City-St-Zip: MIAMI, FL 33157

Title: TCFO () Delete
Name: CASTELO, ENRIQUE L
Address: 11222 QUAIL ROOST DR.
City-St-Zip: MIAMI, FL 33157

Title: S () Delete
Name: ARAGON-CRUZ, JEANNIE
Address: 11222 QUAIL ROOST DR.
City-St-Zip: MIAMI, FL 33157

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CAL, JOHN
Address: 11222 QUAIL ROOST DR.
City-St-Zip: MIAMI, FL 33157

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: JEANNIE ARAGON-CRUZ

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03/25/2005

Electronic Signature of Signing Officer or Director

_____ Date