2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 443718

Entity Name: CENTRUST PROPERTIES INC.

FILED Apr 25, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

4011 W FLAGLER ST., STE 404 2030 S DOUGLAS ROAD

MIAMI, FL 33134 SUITE 105

CORAL GABLES, FL 33134

Current Mailing Address: New Mailing Address:

4011 W FLAGLER ST., STE 404 2030 S DOUGLAS ROAD

MIAMI, FL 33134 SUITE 105

CORAL GABLES, FL 33134

FEI Number: 59-1512269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

VELASCO, ROLANDO VELASCO, ROLANDO 2030 DOUGLAS ROAD 2030 S. DÓUGLAS ROAD

SUITE 105 SUITE 105

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 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: 04/25/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: (X) Change () Addition

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete VELASCO, ROLANDO, Name: Name: VELASCO, ROLANDO,

4011 WEST FLAGLER ST #404 2030 S. DOUGLAS ROAD., SUITE 105 Address: Address:

City-St-Zip: MIAMI, FL 33134 City-St-Zip: CORAL GABLES, FL 33134

Title: VΡ () Delete Title: (X) Change () Addition VELASCO ESQUIVEL, MIRIAM Name: VELASCO ESQUIVEL, MIRIAM Name: 4011 WEST FLAGLER ST STE 404 Address: 2030 S. DOUGLAS ROAD., SUITE 105 Address:

MIAMI, FL 33134 CORAL GABLES, FL 33134 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: ROLANDO VELASCO **PST** 04/25/2008