2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 551977

Entity Name: COOPER & WOLFE, P.A.

FILED Sep 19, 2008 Secretary of State

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

255 ARAGON AVENUE 625 EAST DILIDO DRIVE

2ND FLOOR MIAMI BEACH, FL 33139 US CORAL GABLES, FL 33134 US

New Mailing Address: Current Mailing Address:

255 ARAGON AVENUE 625 EAST DILIDO DRIVE

2ND FLOOR MIAMI BEACH, FL 33139 US CORAL GABLES, FL 33134 US

FEI Number: 59-1781952 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:

COOPER, MARC COOPER, MARC 625 EAST DILIDO DRIVE 255 ARAGON AVENUE MIAMI BEACH, FL 33139 US

2ND FLOOR 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: 09/19/2008

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change () Addition () Delete Title:

COOPER, MARC, Name: Name: COOPER, MARC, 255 ARAGON AVENUE 625 EAST DILIDO DRIVE Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI BEACH, FL 33139

Title: VD Title: VD (X) Change () Addition () Delete

COOPER, MARC, Name: Name: COOPER, MARC, 255 ARTAGON AVENUE 625 EAST DILIDO DRIVE Address: Address: CORAL GABLES, FL 33134 MIAMI BEACH, FL 33139 City-St-Zip: City-St-Zip:

Title: Title: VDS (X) Change () Addition VDS () Delete

COOPER, MARC Name: COOPER, MARC Name: 255 ARAGON AVENUE 625 EAST DILIDO DRIVE Address: Address: City-St-Zip: CORAL GABLES, FL 33134 City-St-Zip: MIAMI BEACH, FL 33139

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: MARC COOPER MR. 09/19/2008