

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 611127

FILED
Feb 13, 2009
Secretary of State

Entity Name: 54TH STREET PROPERTIES, INC.

Current Principal Place of Business:

5150 SW 75 STREET
MIAMI, FL 33143 US

New Principal Place of Business:

Current Mailing Address:

5150 SW 75 STREET
MIAMI, FL 33143 US

New Mailing Address:

FEI Number: 59-1890062

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION COMPANY OF MIAMI
1500 MIAMI CENTER
201 S BISCAYNE BLVD
MIAMI, FL 33131 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: LEE, CARL,
Address: 5150 SW 75 STREET
City-St-Zip: MIAMI, FL 00000,

Title: S () Delete
Name: NEVILLE, DEBRA,
Address: 5150 SW 75 STREET
City-St-Zip: MIAMI, FL 00000,

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: NEVILLE, DEBRA,
Address: 5150 SW 75 STREET
City-St-Zip: MIAMI,, FL 33143

Title: S (X) Change () Addition
Name: ATTIN, NATALIE,
Address: 5150 SW 75 STREET
City-St-Zip: MIAMI,, FL 33143

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: DEBRA NEVILLE

PD

02/13/2009

Electronic Signature of Signing Officer or Director

Date