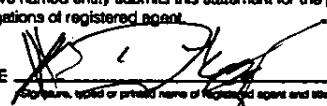
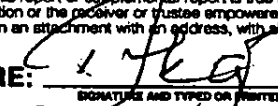


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 23, 2005 8:00 am
Secretary of State

01-21-2005 90042 039 ****61.25

DOCUMENT # 707580					
1. Entity Name BISCAYNE LAKE GARDENS BUILDING "B", INC.					
Principal Place of Business 2880 NE 203RD ST MIAMI, FL 33180			Mailing Address 2865 NE 201 TERR AVENTURA, FL 33180 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
				Country	
4. FEI Number 59-1235863				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
NILSEN, PETER 2880 NE 203 STREET SUITE #B-8 AVENTURA, FL 33180			GORDON, DONALD 2880 NE 203 ST B-9 Aventura, FL 33180		
			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: 					
(NOTE: Registered Agent signature required when releasing)					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS					
TITLE	TD	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	LEVINE, RALPH		NAME	LEVINE, RALPH	
STREET ADDRESS	2880 NE 203 ST		STREET ADDRESS	2880 NE 203 ST B1	
CITY - ST - ZIP	AVENTURA, FL		CITY - ST - ZIP	Aventura, FL 33180	
TITLE	PD	☐ Delete	TITLE	D	☒ Change ☐ Addition
NAME	NILSEN, PETER		NAME	NILSEN, PETER	
STREET ADDRESS	2880 NE 203RD ST #B-8		STREET ADDRESS	2880 NE 203 ST. B-8	
CITY - ST - ZIP	AVENTURA, FL 33180		CITY - ST - ZIP	Aventura, FL 33180	
TITLE	SD	☐ Delete	TITLE	P	☐ Change ☒ Addition
NAME	LEVINE, SELMA		NAME	GORDON, DONALD	
STREET ADDRESS	2880 N.E. 203 STREET -SUITE #B-1		STREET ADDRESS	2880 NE 203 ST B09	
CITY - ST - ZIP	AVENTURA, FL 33180		CITY - ST - ZIP	Aventura, FL 33180	
TITLE		☐ Delete	TITLE	VP	☐ Change ☒ Addition
NAME			NAME	SWISSA HAIN	
STREET ADDRESS			STREET ADDRESS	2880 NE 203 ST. B26	
CITY - ST - ZIP			CITY - ST - ZIP	Aventura, FL 33180	
TITLE		☐ Delete	TITLE	SECRETARY TREASURER	☐ Change ☒ Addition
NAME			NAME	OLIVIER LAUREAT	
STREET ADDRESS			STREET ADDRESS	2880 NE 203 ST. B36	
CITY - ST - ZIP			CITY - ST - ZIP	Aventura, FL 33180	
TITLE		☐ Delete	TITLE		☐ Change ☐ Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
12. 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: 					
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR					
Date: 1-11-05 Time: 3:05 PM Phone: 932-8180					