2006 FOR PROFIT CORPORATION

ANNUAL REPORT

FILED Mar 06, 2006 8:00 am Secretary of State

03-06-2006 90007 004 ***150.00 DOCUMENT # F02000002494 1. Entity Name EFESOS PROPERTIES N.V., INC. 40063614 Principal Place of Business Mailing Address 9090 S.W. 152ND STREET, SUITE 106 -- -9000-S:W: 152ND STREET, SUITE 106 -MIAML FL-33157 MIAMI, FL 33157 2. Principal Place of Business 3. Mailing Address QUB CULJ3046.2 : 221P 9155 S. DEDECAND BLUD Suite, Apt. #, etc.
SUITE 1602 Suite, Apt. #, etc. CR2E034 (11/05) 02222006 Chg-P 1605 371 UE City & State City & State 4. FEI Number Applied For miami, Fl MIQMI 59-2163919 Not Applicable Country USA Country \$8.75 Additional 5. Certificate of Status Desired 05A Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Blown ESG BROWN, B. MACKAY ESQ. Street Address (P.O. Box Number is Not Acceptable) C/O WHITE & BROWN, P.A. 9000-S:W: 152ND STREET, SUITE 102 S. DADELAND BLUD MIAMI: FL 33157 miam 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 ac the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150:00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be. Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. ☐ Delete TITLE TITLE MOUZAKIS, ATHINA NAME NAME SOUTHOUSE ANASSOLD S 2216 9000 S.W. 152ND STREET, SUITE 106 STREET ADDRESS STREET ADDRESS miami, F1 33156 CITY-ST-ZIP MIAMI, FL 33157 CITY-ST-ZIP TITLE ☐ Delete TITLE MOUZAKI, DESPINA NAME NAME SOUTH ONJB CIUAJ30AD. BLUD 41602 STREET ADDRESS 9000 S.W. 152ND STREET, SUITE 106-STREET ADDRESS Mam, Fl 33156 CITY_ST_7IP CITY-ST-ZIP MIAMI_FL_33157 TITLE ☐ Delete TITLE MOUZAKI, PARASKEVI NAME NAME SOUTH OND CHANGOACE DEIP 9000-S.W. 152ND STREET, SUITE 108-STREET ADDRESS STREET ADDRESS Miami, Fl 33156 MIAMI: FL 33157 CITY-ST-ZIP CITY-ST-ZIP TITLE MGR ☐ Delete TITLE NAME SANZ, JOSEPH A NAME S. DADELLADO BUUDAILOS 9000 S.W. 152ND STREET, SUITE 106 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI: FL 33157 CITY-ST-ZIP miami, pl Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with with all other like empowered.

SIGNATURE:

E OF SIGNING OFFICER OR DIRECTOR