2003 FOR PROFIT CORPORATION

F02000002494

UNIFORM BUSINESS REPORT (UBR)

1. Entity Name

DOCUMENT #

EFESOS PROPERTIES N.V., INC.



FILED
May 05, 2003 8:00 am
Secretary of State
05 05 2002 00226 001 ***150 00

						WI TO			
Principal Place of Business 9000 S.W. 152ND STREET, SUITE 106 MIAMI FL 33157			Mailing Address 9000 S.W. 152ND STREET. SUITE 106 MIAMI FL 33157						
2. Principal Place of Business			3. Mailing Address				- -		
Suite, Apt. #, etc.			Suite, Apt. #, etc.			<u> </u>	☐ CHECK HERE IF MAKING CHANGES		
City & State			City & State				4. FEI Number 59-2163919 Applied For Not Applicable		
Zip	p Country			Zip Cour			5. Certificate of Status Desired		
6. Name and Address of Current			Registered Agent				7. Name and Address of New Registered Agent		
or Hallo die Nodrose of Barrott Rogistor Ca Ngolit					N	lame			
BROWN, B. MACKAY ESQ. C/O WHITE & BROWN, P.A.					S	Street Address (P.O. Box Number is Not Acceptable)			
		REET, SUITE 102			ļ				
MIAMI FL 33157					C	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									
				T		- <u> </u>			
FILE NOW!!! FEE IS \$150.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State							9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees		
10.		OFFICERS AND		DRS	11.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PCD			☐ Delete	TITLE	The same	ANAFER Change Addition		
NAME	MOUZAKK				NAME	Jo	SEPH A. SANZ OD S.W. 152 ST STE 106		
STREET ADDRESS CITY-ST-ZIP	9000 S.W. MIAMI FL	. 152ND STREET, SUITE	106		STREET AL	DORESS 40	100 SW. 13 2		
TITLE	V	33131		□ Delete	TITLE	- M	Change Addition		
NAME	MOUZAKI,	DESPINA		Delete.	NAME	ļ			
STREET ADDRESS		152ND STREET, SUITE	106		STREET AC	DDRESS			
CITY-ST-ZIP	MIAMI FL	33157			CITY-ST-	ZIP			
TITLE	V			☐ Delete	TITLE		☐ Change ☐ Addition		
NAME CONCET LONDOCCO		PARASKEVI	- 400	•	NAME CEDEET AS) DRICEO	·		
STREET ADDRESS CITY-ST-ZIP	9000 S.W.	152ND STREET, SUITE	: 106		STREET AL CITY-ST-				
	MIAMI FL	3315/		□ Defete	╅—	211	☐ Change ☐ Addition		
TITLE NAME				☐ Delete	TITLE NAME	ľ	Citalige C Addition)		
STREET ADDRESS					STREET AL)DRESS			
City-ST-ZIP					CITY-ST-	ZIP			
TITLE				☐ Delete	TITLE		☐ Change ☐ Addition		
NAME					NAME		}		
STREET ADDRESS					STREET AL	l l			
CITY-ST-ZIP					CITY-ST-	ZIP			
TITLE				Delete	TITLE		☐ Change ☐ Addition		
NAME STREET ADDRESS					NAME STREET AL	DOBESS			
CITY-ST-ZIP					CITY-ST-	ſ	,		

12. Thereby certify that the information supplied with this filling 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 607, 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: