2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 27, 2005 8:00 am Secretary of State DOCUMENT # F03000000157 1. Entity Name 04-27-2005 90342 049 ***150.00 BOCA RATON INVESTMENT GP, INC. Principal Place of Business Mailing Address % REAL ESTATE CAPITAL PARTNERS L.P. 1185 AVENUE OF THE AMERICAS NEW YORK CITY NY 10036 % REAL ESTATE CAPITAL PARTNERS L.P. 1185 AVENUE OF THE AMERICAS NEW YORK CITY NY 10036 AUUTUUUA 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE City & State 4. FEI Number Applied For City & State 14-1859932 Not Applicable Zip Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CORPORATION SERVICE COMPANY Street Address (P.O. Box Number is Not Acceptable) 1201 HAYS STREET TALLAHASSEE FL 32301-2525 Zip Code City 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 DATE Signature, typed or numbed pame of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5,00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition TITLE TITLE ☐ Delete KINNEY, ROBERT L NAME NAME 1185 AVENUE OF THE AMERICAS, 18TH FLOOR STREET ADDRESS STREET ADDRESS NEW YORK NY 10036 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete THILE ☐ Change Addition NAME SHEWER, KARIN NAME 1185 AVENUE OF THE AMERICAS, 18TH FLOOR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP NEW YORK NY 10036 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME LAMIE, HUGH R NAME STREET ADDRESS STREET ADDRESS 1185 AVENUE OF THE AMERICAS, 18TH FLOOR CITY-ST-ZIP CITY-ST-7IP NEW YORK NY 10036 Change Addition ST TETLE TITLE Delete MCGEE, ROBERT NAME NAME 1185 AVENUE OF THE AMERICAS, 18TH FLOOR STREET ADDRESS STREET ADDRESS NEW YORK NY 10036 CITY-ST-ZIP CITY-ST-ZIP c TITLE ☐ Change ☐ Addition TITLS ☐ Delete SASS, MARTIN D NAME NAME 1185 AVENUE OF THE AMERICAS, 18TH FLOOR STREET ADDRESS STREET ADDRESS NEW YORK NY 10036 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Othange Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7/P 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 as 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 Black 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

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