FILED 2001 UNIFORM BUSINESS REPORT (UBR) May 23, 2001 8:00 am Secretary of State DOCUMENT # **F54849** 1. Entity Name 05-23-2001 91194 043 ***150.00 NEAL S. LITMAN, P.A. Principal Place of Business Mailing Address 2900 SW 28TH TERRACE 2900 SW 28TH TERRACE A0071458 2ND FLOOR 2ND FLOOR MIAMI FL 33133 MIAMI FL 33133 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State Applied For City & State 4. FEI Number 59-2174780 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name LITMAN, NEAL S. Street Address (P.O. Box Number is Not Acceptable) 2900 SW 28TH TERRACE 2ND FLOOR **MIAMI FL 33133** Zip Code City FL 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) FILE NOW! | FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 20 1 Fee will be \$550.00 Trust Fund Contribution. (See criteria on back) Make Check Payat e to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. OFFICERS AND DIRECTORS PSD CR2E034 (10/00) TITLE □ Delete TITLE Change Addition LITMAN, NEAL S. NAME NAME 2900 SW 28TH TERRACE, 2ND FLOOR STREET ADDRESS STREET ADORESS CITY-ST-ZIP **MIAMI FL 33133** CITY-ST-ZIP TITLE ☐ Change ☐ Addition DITLE ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete TITLE ☐ Change

STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

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 missignature 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 a required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-7IP

CITY-ST-ZIP

NAME

THILE

NAME

NG OFFICER OF DIRECTOR

☐ Delete

☐ Delete

☐ Change

☐ Change

Addition

☐ Addition



CHARLES E. SAMMONS

WWW.LITMANLAWYER.COM TELEPHONE: 305-441-9000 Telecopier: 305-441-1991

GROVE PLAZA BUILDING - SECOND FLOOR - 2900 S.W. 28 TERRACE - COCONUT GROVE, FL 33133

May 16, 2001

VIA FEDERAL EXPRESS

Secretary of State **Division of Corporations** P.O. Box 6327 Tallahassee, Florida 32314

Re: Annual Report

> The Fifty Acres, Inc. S.B. 3105 Corp

Neal S. Litman, P.A.

Dear Sir or Madame:

Enclosed herewith please find our 2001 Annual Reports for the above-captioned corporation. The application and checks were signed by Mr. Litman on April 25, 2001 for me to send out however, I have been away from the office due to my mother being ill. Today I came back from being away and realized no one had sent out the applications and therefore I immediately called the Secretary of State and was adv sed to mail the application and checks immediately with a letter of explanation.

Your consideration in this matter will be appreciated.

Sincerely yours,

NEAL S. LITMAN, P.A.

Marisol L. Gonzalez

egal Assistant