FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR 21 PM 3:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L72293 (8)

1. Corporation Name

AMERILAND PROPERTIES, INC.

Principal Place of Business	Mailing Address
~~% PENINSULA REGISTERED AGENTS, INC.~~ ~~200 SE FIRST ST~~ ~~MIAMI FL 33131~~	~~% PENINSULA REGISTERED AGENTS, INC.~~ ~~200 SE FIRST ST~~ ~~MIAMI FL 33131~~

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified: 05/08/1990
3a. Date of Last Report: 03/16/1994

2. Principal Place of Business	2a. Mailing Address
21 1321 S.W. 107th Avenue	26 1321 S.W. 107th Avenue
Suite, Apt. #, etc. 22 Suite 210A	Suite, Apt. #, etc. 27 Suite 210A
City & State 23 Miami, FL	City & State 28 Miami, FL
Zip 24 33174 Country 25 U.S.A.	Zip 29 33174 Country 30 U.S.A.

4. FEI Number: 65-0202922 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
~~PENINSULA REGISTERED AGENTS, INC.~~ ~~200 SE FIRST ST~~ ~~ATICO FINANCIAL CENTER~~ ~~MIAMI FL 33131~~	81 Name: Masoud Shojaee 82 Street Address (P.O. Box Number is Not Acceptable): 1321 S.W. 107th Avenue 83 Suite 210A 84 City: Miami FL 85 Zip Code: 33174

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE _____ 3/2/95
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D ☒ Change ☐ Addition
NAME	SHOJAEE, MASOUD	1.2 NAME	Shojaee, Masoud
STREET ADDRESS	~~200 SE FIRST ST~~	1.3 STREET ADDRESS	1321 S.W. 107th Avenue, Suite 210A
CITY-ST-ZIP	~~MIAMI FL~~	1.4 CITY-ST-ZIP	Miami, FL 33174
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	PORTELA, CONSUELO	2.2 NAME	Portela, Consuelo
STREET ADDRESS	~~200 SE FIRST ST~~	2.3 STREET ADDRESS	1321 S.W. 107th Avenue, Suite 210A
CITY-ST-ZIP	~~MIAMI FL~~	2.4 CITY-ST-ZIP	Miami, FL 33174
TITLE		3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ PRESIDENT 3/2/95 (305) 223-9596
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

MASOUD SHOJAEE

0131602 CP