2008 FOR PROFIT CORPORATION

FILED Jan 22, 2008 08:00 AN Secretary of State

·/ · ANN	IUAL REPORT
DOCUMENT # M3585 1. Entity Name PARK WASHINGTON, INC.	59
Principal Place of Business 230-5TH ST MIAMI BEACH, FL 33139	Mailing Address 230-5TH ST MIAMI BEACH, FL 33139
	

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Principal Plac 230-5TH ST MIAMI BEACI		Aailing Address 230-5TH ST MIAMI BEACH, FL 33139				
DO NOT WRITE IN THIS SPACE			CE	01082008 No Chg-P CR2E034 (11/05) 4. FEI Number		
ROBINS, SCOTT 230-5TH STREET MIAMI BCH., FL 33139			DO NOT WRITE IN THIS SPACE			
8. The above the obligat SIGNATURE	named entity submits this statement for the long of registered agent.	purpose of changing its registere	L ed office or register	ed agent, or bo	th, in the State of Florida. I am familiar with, and accept	
FIL After Ma	E NOWIII FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	9. Election Campaign Finar Trust Fund Contribution.		00 May Be	DATE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OFFICERS AND DIRE PD ROBINS, SCOTT 230-5TH STREET MIAMI BCH., FL 33139	CTORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE					U00000791144 01/23/08-80062-014 150.00	
NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS		· · · · · · · · · · · · · · · · · · ·			NOT WRITE	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP			·	;		
TITLE NAME 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 of 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 I beceiver or I beceiver on I because 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 an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF