

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M51024

Entity Name: FOUR POINTS, INC.

FILED  
Jan 24, 2007  
Secretary of State

**Current Principal Place of Business:**

1601 NW 72 AVE  
MIAMI, FL 33126 US

**New Principal Place of Business:**

**Current Mailing Address:**

POST OFFICE BOX 520367  
P.O. BOX 520367  
MIAMI, FL 331520367 US

**New Mailing Address:**

FEI Number: 65-0015538      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOLDMAN, BRUCE J.  
2701 LE JEUNE RD, STE 405  
CORAL GABLES, FL 33134 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DIAMOND, FRED,  
Address: 1601 NW 72ND AVE  
City-St-Zip: MIAMI, FL

Title: D ( ) Delete  
Name: JAWITZ, LANE,  
Address: 1601 NW 72ND AVE  
City-St-Zip: MIAMI, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LANE JAWITZ

D

01/24/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date