2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000004837

FILED Jan 09, 2006 Secretary of State

Entity Name: PHI DELTA THETA MIAMI HOUSE CORPORATION

Current Principal Place of Business: New Principal Place of Business:

3000 SW 3RD AVENUE 1227 SW 3RD AVENUE

#510 #515

MIAMI, FL 33129 MIAMI, FL 33130

Current Mailing Address: New Mailing Address:

3000 SW 3RD AVENUE 1227 SW 3RD AVENUE

#510 #515

MIAMI, FL 33129 MIAMI, FL 33130

FEI Number: 20-1117315 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

BARATTA, LARRY G BARATTA, LARRY G 3000 SW 3RD AVENUE 1227 SW 3RD AVENUE #510 #515 MIAMI, FL 33129 US MIAMI, FL 33130 US

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: LB 01/09/2006

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

BARATTA, LARRY G BARATTA, LARRY G Name: Name: Address: 1227 SW 3RD AVENUE #515

3000 SW 3RD AVENUE #510 Address: MIAMI, FL 33130 City-St-Zip: MIAMI, FL 33129 City-St-Zip:

Title: Title: (X) Change () Addition () Delete HARTNETT, JAMES Name: Name: FIMANI, MIKE J

Address: 2100 PONCE DE LEON BLVD #750 Address: 1040 SW 13TH DRIVE City-St-Zip: MIAMI, FL 33143 City-St-Zip: BOCA RATON, FL 33486

Title: (X) Delete Title: () Change () Addition

FIMIANI, MIKE J Name: Name: 1040 SW 13TH DRIVE Address: Address: City-St-Zip: BOCA RATON, FL 33486 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LGB Ρ 01/09/2006