2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N94000001771

TI FILED

May 09, 2005

Secretary of State

Entity Name: SUN BEAM COMMUNITY DEVELOPMENT CORP.

Current Principal Place of Business: New Principal Place of Business: 3510 BISCAYNE BLVD. SUITE 200 MIAMI, FL 33137 **New Mailing Address: Current Mailing Address:** 3510 BISCAYNE BLVD. MIAMI, FL 33137 FEI Number: 65-0514712 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MOGHADDAM, ANVAR B BASHIRI, KAMBIZ 12731 SW 119 STREET 3510 BISCAYNE BLVD. MIAMI, FL 33185 200 MIAMI, FL 33185 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: KAMBIZ BASHIRI 05/09/2005 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition MOGHADDAM, ANVAR B BASHIRI, KAMBIZ Name: Name: 12731 SW 119 STREET Address: 12731 SW 119 STREET Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33186 Title: CMD () Delete Title: () Change () Addition DIXON, MARY D Name: Name: Address: 3510 BISCAYNE BLVD, STE, 200 Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: Title: VPD () Delete Title: () Change () Addition CASTELLANOS, DIANA Name: Name: 3510 BISCAYNE BLVD. STE. 200 Address: Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: Title: VΡ () Delete Title: () Change () Addition Name: BASHIRI, ADEL Name: 3510 BISCAYNE BLVD. STE. 200 Address: Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: Title: CD () Delete Title: () Change () Addition KHATIBI, MOSHEN Name: Name: 3510 BISCAYNE BLVD. STE. 200 Address: Address: City-St-Zip: MIAMI, FL 33137 City-St-Zip: Title: (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Name:

Address:

City-St-Zip:

SIGNATURE: KAMBIZ BASHIRI P 05/09/2005

KAMBIZ BASHIRI

MIAMI, FL 33137

3510 BISCAYNE BLVD., STE 200

Name:

Address:

City-St-Zip: