

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000058925

FILED
Apr 02, 2004
Secretary of State

Entity Name: SHOMA VILLAS AT COUNTRY CLUB OF MIAMI, INC.

Current Principal Place of Business:

8550 NW 33 STREET
SUITE 100
MIAMI, FL 33122

New Principal Place of Business:

5835 BLUE LAGOON DRIVE 4RTH FLOOR
MIAMI, FL 33126

Current Mailing Address:

8550 NW 33 STREET
SUITE 100
MIAMI, FL 33122

New Mailing Address:

5835 BLUE LAGOON DRIVE 4RTH FLOOR
MIAMI, FL 33126

FEI Number: 65-1017488

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SHOJAE, MASOUD
8550 NW 33 STREET
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

SHOJAE, MASOUD
5835 BLUE LAGOON DRIVE 4RTH FLOOR
MIAMI, FL 33126 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:

04/02/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: SHOJAE, MASOUD
Address: 8550 NW 33 ST. 100
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: DE SHOJAE, MARIA LAMAS
Address: 8550 NW 33 ST. SUITE 100
City-St-Zip: MIAMI, FL 33122

Title: VP () Delete
Name: MARTIN, TONIA
Address: 8550 NW 33RD ST. SUITE 100
City-St-Zip: MIAMI, FL 33122

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SHOJAE, MASOUD
Address: 5835 BLUE LAGOON DRIVE 4RTH FLOOR
City-St-Zip: MIAMI, FL 33126

Title: D (X) Change () Addition
Name: DE SHOJAE, MARIA LAMAS
Address: 5835 BLUE LAGOON DRIVE 4RTH FLOOR
City-St-Zip: MIAMI, FL 33126

Title: VP (X) Change () Addition
Name: MARTIN, TONIA
Address: 5835 BLUE LAGOON DRIVE 4RTH FLOOR
City-St-Zip: MIAMI, FL 33126

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MASOUD SHOJAE

D

04/02/2004

Electronic Signature of Signing Officer or Director

Date