## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000065753

Entity Name: LOS PINOS PROPERTIES, INC.

FILED Jul 20, 2008 Secretary of State

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

361 LOS PINOS PLACE 4770 BISCAYNE BOULEVARD CORAL GABLES, FL 33143

FOURTH FLOOR MIAMI, FL 33137

**Current Mailing Address: New Mailing Address:** 

361 LOS PINOS PLACE 4770 BISCAYNE BOULEVARD

CORAL GABLES, FL 33143 FOURTH FLOOR MIAMI, FL 33137

FEI Number: 65-1028466 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:

MANASTER, JOSHUA D ESQ 1428 BRICKELL AVE., 8TH FLOOR

MIAMI, FL 33131

MANASTER, JOSHUA D ESQ. 4770 BISCAÝNE BOULEVARD FOURTH FLOOR MIAMI, FL 33137 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: 07/20/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

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

MANASTER, JOSHUA D MANASTER, JOSHUA D Name: Name: 1428 BRICKELL AVE., 8TH FLOOR Address: 4770 BISCAYNE BOULEVARD Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33137

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

CISNEROS, GABRIELA Name: Name: CISNEROS, GABRIELA 361 LOS PINOS PL. Address: 4770 BISCAYNE BOULEVARD Address:

CORAL GABLES, FL 33143 MIAMI, FL 33137 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JOSHUA MANASTER 07/20/2008 Μ