## FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## FILED Jun 12, 2008 8:00 am Secretary of State

DOCUMEN   # P01000036999								06-12-2008 90002 049 ***150.00			
,	PROPERTIES,	INC.				,					
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2. Principal Place of Business 3. Mailing Addit 1161 DOLPHIN RD. 1161 DOLPHI				-				· · ·			
Suite, Apt.		<u></u>	Suite, Apt. #, etc.					00 NOT WRITE I	N THIS SPACE		
City & State			City & State					4. FEI Number   Applied For   651101262   Not Applicable			
. Zip	Coun	Country Zip C		Countr	Country		Certificate of Status Desired		5 Additional		
33404	l us	[ 3:	33404 US		JS			7. Name and Address of Current Registered Agent			
. <u>.</u>	50	NOTWO	حے عوب	-		Name RANDELI	. CHRIS	STOPHER	_		
DO NOT WRITE								dress (P.O. Box Number is Not Acceptable) LPHIN RD,			
IN THIS SPACE											
						City SINGER	ISLAND.	LAND, FL Zip Code 33404			
8. The above	named entity sub	rnits this statement fo	r the pu	rpose of changin	g its re	gistered offic	e or registe	ered agent, or both, in the State	of Florida.		
SIGNATURE CHRISTOPHER RANDELL 4/30/2008											
		ofinted name of registered	l agent a	January 1 - I				ignature required when reinstating)	DA'	TE .	
Tax filing r	oration is eligible t equirement and e ria on back)	o satisfy its Intangible lects to do so.	Ma	After May	1, Fee d UBR	is \$550.00 is \$61.25		10. Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees	
11.	1	OFFICERS AND DIRE	CTOR	S	-					£	
TITLE NAME	D RANDELL, CHRISTOPHER				TITL!					15	
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13. I hereby certify that the information supplied with this filing does not qualify 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 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 prystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or on all altachment with an address, with all other like empowered.											
		awacoment with an a	aaress,	LAIR							
SIGNATURE: 4/30/2008 561-248-3093 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #											