2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 18, 2005 08:00 AM DOCUMENT # P01000073817 **Secretary of State** 1. Entity Name HIDDEN HILLS OF MIAM!, INC. Mailing Address Principal Place of Business CONCORD BUILDING, SUITE 300 66 WEST FLAGLER STREET MIAMI FL 33130 CONCORD BUILDING, SUITE 300 66 WEST FLAGLER STREET MIAMI FL 33130 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) 1st MOORE Applied For 4. FEI Number City & State City & State 65-1124830 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent TOYNE, ROSS B ESQ. Street Address (P.O. Box Number is Not Acceptable) ROSS B. TOYNE & ASSOCIATES, P.A. 66 W. FLAGLER ST. CONCORD BLDG. STE. #300 MIAMI FL 33130 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE Registered Agent signature required when remalating) Signature, typed or printed name of registered agent and tills if applicable FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10, PDS Change ☐ Addition TITLE ☐ Delete TOYNE, ROSS B NAME 66 WEST FLAGLER STREET SUITE 300 STREET ADDRESS STREET ADDRESS MIAMI FL 33130 CHY-ST-ZP CITY-ST-ZIP U00000234233 ☐ Change Addition THELE Delete HILE 02/18/05-80011-025 150.00 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TOLL NAME NAME STREET ADDRESS STREET ADDRESS CHY-S1-219 CITY-ST-ZIP ☐ Chanσe ☐ Addition Delete THEE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7/P CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete HHE DILLE NAM STREET ADDRESS STREET ADDRESS CHY-ST-7P CITY - ST - ZIP ☐ Change ☐ Addition Delete Tall E THEE NAME NAME STREET ACORESS STREET ADDRESS CHY-SI-ZIP CITY-ST-ZIP 12. It 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

FILED

on 31,2005 \$ 305-377-1910