FILED

2002 UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Sep 16, 2002 8:00 am Secretary of State DOCUMENT # P01000077717 09-16-2002 90095 023 ***150.00 PHOENIX REAL ESTATE COUNSELORS, INC. Principal Place of Business Mailing Address 1221 BRICKELL AVE., 9TH FLOOR 1221 BRICKELL AVE., 9TH FLOOR **MIAMI FL 33131 MIAMI FL 33131** 2. Principal Place of Business , 224 BRICKELL AUC 3. Mailing Address Suite, Apt. #, etc Suite, Apt. #, etc DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For miami 65-1132691 Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired =DAD8 Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SACHER, CHARLES P Street Address (P.O. Box Number is Not Acceptable) 2655 LEJEUNE RD., STE. 1101 **CORAL GABLES FL 33134** City Zip Code 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 (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$550.00 10. Election Campaign Financing Tax filing requirement and elects to do so. \$5.00 May Be After September 13, 2002 Fee will be \$750,00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State 11. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITI F Addition NAME DALKOWSKI, JOHN A III NAME STREET ADDRESS 1221 BRICKELL AVE., 9TH FLOOR STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33131** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP-CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIF CITY-ST-ZIP TITLE ☐ Delete Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 11 or Block 12 if changed, or on an attachment with/apracdgress, with all other like empowered.

PHOENIX | REAL ESTATE COUNSELORS, INC. #PO10000 77717

VIA: US MAIL

FLORIDA DEPARTMENT OF STATE **Division of Corporations Uniform Business Report Filings** P.O. Box 1500 Tallahassee, FL 32302-1500

Re: Original UBR Report

Dear Sir / Madam:

As directed by Jennifer at the Division of Corporations Help Desk [850-245-6939, we are attaching this letter to the required UBR document filing.

PHOENIX Real Estate Counselors is a new business in Florida, and this is the first year of operations. No UBR report form was received in the mail until recently, and we were not advised that such a requirement existed.

In the future, we will make certain that the annual report is filed prior to the May 1 deadline.

Thank you in advance for your understanding and assistance.

Very∤truly yours,

A. Dalkowski III

Director

Enclosures

JAD/cl