2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P02000053718

1. Entity Name
OCEAN TOWER I 604, INC.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 APR 11 PM 12:06

Principal Place of Business	Mailing Address
1200 BRICKELL AVE STE 900 MIAMI FL 33131	1200 BRICKELL AVE STE 900 MIAMI FL 33131

2. Principal Place of Business	3. Mailing Address
200 S. Biscayne Blvd	200 S. Biscayne Blvd.
Suite, Apt. #, etc.: Suite 4000	Suite, Apt. #, etc.: Suite 4000
City & State: Miami, Florida	City & State: Miami, Florida
Zip: 33131 / Country: USA	Zip: 33131 / Country: USA

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: ☒ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AGI REGISTERED AGENTS INC 1200 BRICKELL AVE STE 900 MIAMI FL 33131	Name: Peninsula Registered Agents, Inc. Street Address (P.O. Box Number is Not Acceptable): 200 S. Biscayne Blvd. 43rd Floor City: Miami FL Zip Code: 33131

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.

Peninsula Registered Agents, Inc.

SIGNATURE By: [signature]
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Debra Palmisano, Vice President

FILE NOW!!! FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD APARICIO, GERARDO 1200 BRICKELL AVE STE 900 MIAMI FL 33131 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☒ Change ☐ Addition 200 S. Biscayne Blvd., #4000 Miami, Florida 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition 900016127059 04/17/03--01003--004 **150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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.

SIGNATURE: [signature] 4/2/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Gerardo Aparicio, President

C05000034 4/8/03