2004 FOR PROFIT CORPORATION

SIGNATURE:

Apr 29, 2004 8:00 am Secretary of State **ANNUAL REPORT** 04-29-2004 90319 020 ***150 00 DOCUMENT # P02000071964 1. Entity Name SEVENTEEN SEVENTY-ONE WEST AVENUE, INC. Principal Place of Business Mailing Address 650 WEST AVE STE 704 650 WEST AVE STE 704-MIAMI BEACH, FL 33139 MIAMI BEACH, FL 33139 2. Principal Place of Business 3. Mailing Address 401 Bay Road 401 Suite, Apt. #, etc. 04262004 Chg-P CR2E034 (10/03) No. 5 & State City & State 4. FEI Number Applied For 14-1869678 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Havard. Sco#4 avard SCOTT, L. HOWARD III 650 WESTAVE STE-704 MIAMI BEACH, FL 33139 Beach 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 age L. Havard Scott, TI (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. L. Havard Scott, IN Hange Delete TITLE TITLE SCOTT, L. HAVARD III 1401 Bay Road, No. 501 650 WEST AVE STE 704 STREET ADDRESS STREET ADDRESS Beach FL 33139 MIAMI BEACH, FL 33139 CITY-ST-ZIP CITY-ST-ZIP THILE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE - Delete -TITLE Change - Addition-NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITI F Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby 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 10 or Block 11 if changed, or on an attachment with an appears, with all other life empowered.

L. Havard Scott, TI

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