2004 FOR PROFIT CORPORATION ANNUAL REPORT

changed, or on an attachment with

SIGNATURE:

Apr 26, 2004 8:00 am Secretary of State **DOCUMENT # P02000082853** 04-26-2004 90556 007 ***150.00 1. Entity Name RIM REAL ESTATE INVESTORS, INC. Mailing Address Principal Place of Business 10750 SW 128TH AVE --10750 SW 128TH AVE MIAMI: FL 33186 -MIAMI, FL 33188 2. Principal Place of Business 3. Mailing Address 12730 SW 116th ST 12730 S.W 116thST Suite, Apt. #, etc. Suite, Apt. #, etc. 04202004 Cha-P CR2E034 (10/03) 4. FEI Number Applied For City & State City & State MIAM! MIMIL, FLA 22-3861357 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired 33/86 33/86 Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent MARTINEZ SPIEGEL & UTRERA, P.A. Street Address (P.O. Box Number is Not Acceptable) 1840 SW 22ND ST. 4TH-FLOOR -MIAMI; FL 33145 Miani 1 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. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 ☐ Delete TITLE ☐ Addition TITLE MARTINEZ, RAUL NAME NAME 12730 5 W. 116ThST STREET ADDRESS 10750 SW 128TH AVE -- STREET ADDRESS CITY-ST-ZIP MIANI, FLORIDA 33186 CITY-ST-ZIP MIAMI, FL 33186 VSTD ☐ Delete TITLE ☐ Addition TITLE MARTINEZ, IDANIA NAME NAME 127305.W 116th ST 10750 SW 128TH AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI, FL-33186-☐ Delete TITLE Change Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY_ST_7IP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 of the corporation or the receiver or trustee empower

other like empowered.

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