2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

| <u> </u> | AMMORE | , FILLU | | | | | | |
|---|---|--|----------------------|-----------------------------|---|-----------------|----------------|---------------------------------------|
| DOCUMENT # P02000127735 1. Entity Name | | | | | Jan 24, 2005 08:00 AM Secretary of State | | | |
| SALVATI | ON PROPERTIES, INC. | | | | Secreta | ly UIS | iaie | |
| Principal Plac | ce of Business | Mailing Address | | . 5 - 5 - | : | | | |
| 408 NW 68 AVENUE | | 408 NW 68 AVENUE | | • | | | | |
| UNIT 506 PLANTATION FL 33317 | | UNIT 506 PLANTATION FL 333 | 17 | | | | | |
| IEMITATIO | N() E 333 ! / | LAMANOME | • • | , | I STANSETH IN THUS HER COME ENGIN | | | |
| 2. Principal Place of Business | | 3. Mailing Address | | | | # 112 113 | | |
| Suite, Apt #, etc. | | Suite, Apt. #, etc | | | 1 MOODE | ODOEOn4 / | 10/04) | |
| ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ | | W | | | 1st MOORE | CR2E034 (1 | 0/04) | |
| City & Stat | te S | City & State | | | 4. FEI Number 13-4228190 | | | oplied For |
| Zip | Country | Zip | Cour | atry. | 10 1220101 | | 3.75 Add | ot Applicab |
| ŁΙΡ | Country | 2.15 | 000. | ill y | 5. Certificate of Status Desired | | e Require | |
| | 6. Name and Address of Current I | Registered Agent | | | 7. Name and Address of New F | egistered Agr | nt | |
| | | | | Name | | | | |
| SURETTE, DIANE 408 NW 68 AVENUE | | | | Street Address | (P.O. Box Number is Not Acceptable | e) | | |
| UNIT 506 | | | | | | | - | |
| PLANTATION FL 33317 | | | | | | | | |
| | | | | City | | FL | Zip Code | е . |
| | named entity submits this statement for | the purpose of changing its | register | ed office or registe | red agent, or both, in the State of Fl | orida. I am fam | iliar with, | and accep |
| the obligat | tions of registered agent. | > 4 4. | | 1 | | 1 | | - 1743 |
| SIGNATURE | 1 1x and July | occe h | <u>U C</u> | carpe. | | ~/~~ | <u> </u> | |
| -,, - | Signature typod or purified name of registered agent a | ind tille if applicable (NO) | E Hegistere | ed Agent signifiyle require | d when feinstating) | DATE | , _ | |
| | TILE NOW!!! FEE IS \$150.00 | | | | 9. Election Campa | aign Financing | \$5. | 00 May B |
| | May 1, 2005 Fee Will Be \$550.00 k Payable to Florida Department of | State | | | Trust Fund Cor | itribution, | Adde | ed to Fees |
| 10. | OFFICERS AND | DIRECTORS | 11. | | ADDITIONS/CHANGES TO OFF | TCERS AND D | RECTOR | \$1N 11 |
| TITLE | PD | ☐ Delete | TITL | Ę | | | Change | * Addiba |
| NAME | SURETTE, DIANE | | NAM | | | | | |
| STREET ADDRESS CHY-ST ZIP | 408 NW 68 AVENUE SUITE 506 PLANTATION FL 33317 | | | EET ADDRESS (-ST-ZIP | Samo | | | |
| Wite | VP | ☐ Defete | TITL | E | Same. | |] Change | ☐ Additio |
| NAME | BROOKS, MAURICE R | E Delete | NAM | 1E | | _ | 1 Onange | □ tenim |
| CIREET ADDRESS | 408 N.W. 68TH AVE., SUITE 506 | ; | SIR | EET ADDRESS | Mame. | | | |
| CHY-ST-ZIP | PLANTATION FL 33317 | | CHY | '-ST-ZIP | 70 | | - | |
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| NAME STREET ADDRESS | | | NAM STRI | EET ADDFESS | | | | |
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| NAME | | | NAM | 1E | | | | |
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| CITY ST-ZIP | | | | '-ST-ZIP | | | 7 Chanda | ————————————————————————————————————— |
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| STREET ADDRESS | | | | EET ADDRESS | | | | |
| City - ST - 7IF | | | CHY | '-SI-78 | | | | |
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| NAME | , | | NAM | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | EET ADDRESS '-ST-7IP | | | | |
| 42 I haraby | certify that the information supplied with | this filing does not qualify fo | r the ave | mntion stated in S | ection 119.07(3)(i). Florida Statutes. | further certify | that the in | îformation |
| indicated of the coi | f on this report or supplemental report is rporation or the receiver or trustee empo | true and accurate and that i wered to execute this report | ny signa as requi | iture shall have the | same legal effect as it made under | oath, that I am | an officer | or alrection |
| changed | or on an attachment with an address, w | AIRLI SII OLLEL II Ke emboweted | | | / | | - | |

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR PRINTED NAME OF SIGNING OFFICER OFF

SIGNATURE:

DIL DD

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