

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000129274

FILED
Mar 21, 2006
Secretary of State

Entity Name: CONSOLIDATED PROPERTIES OF WEST DADE, INC.

Current Principal Place of Business:

C/O LEE MANDELL, ESQ
ONE SE THIRD AVENUE, TENTH FLOOR
MIAMI, FL 33131

New Principal Place of Business:

3141 SE 14 AVENUE
FORT LAUDERDALE, FL 33316

Current Mailing Address:

C/O LEE MANDELL
ONE SE THIRD AVENUE
MIAMI, FL 33131

New Mailing Address:

PO BOX 350430
FORT LAUDERDALE, FL 33335 US

FEI Number: 13-4230243

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MANDELL, LEE ESQ.
ONE SE THIRD AVENUE
TENTH FLOOR
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

JACOBSON, HARVEY
3141 SE 14 AVENUE
FORT LAUDERDALE, FL 33316 US

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.

SIGNATURE: HARVEY JACOBSON

03/21/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: JACOBSON, HARVEY
Address: 3141 SE 14 AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: HARVEY JACOBSON

PD

03/21/2006

Electronic Signature of Signing Officer or Director

Date