2007 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 23, 2007 08:00 A Secretary of State DOCUMENT # P03000017214 1. Entity Name BENJA PROPERTIES, INC. Principal Place of Business Mailing Address 848 BRICKELL KEY DR 9801 SW 5TH ST **SUITE #304** MIAMI, FL 33174 MIAMI, FL 33131 01092007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number NOT APPLICABLE Applied For Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent VELEZ, GERMAN DO NOT WRITE 848 BRICKELL KEY DR **SUITE #304** IN THIS SPACE MIAMI, FL 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. SIGNATURE Signatura, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS TITLE NAME VELEZ, GERMAN 848 BRICKELL KEY DR STE 304 STREET ADDRESS CRTY-ST-ZIP MIAMI, FL 33131 TITLE ORTEGA, SONIA NAME STREET ADDRESS 848 BRICKELL KEY DR STE 304 CITY-ST-7IP MIAMI, FL 33131 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS U00000722191 05/02/07-80022-004 150.00 CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

· GERMANYELEZ/04-19-07

226-244E

Daytime Phone #

FILED