2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018046

Entity Name: FS UNIT 3206, INC

FILED Apr 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1200 BRICKELL AVE STE 900 1000 BRICKELL AVE STE 300

MIAMI, FL 33131 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

1200 BRICKELL AVE STE 900 1000 BRICKELL AVE STE 300

MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 76-0737056 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

AGI REGISTERED AGENTS, INC. AGI REGISTERED AGENTS, INC. 1000 BRICKELL AVE STE 300 1200 BRICKELL AVE STE 900 MIAMI, FL 33131 MIAMI, FL 33131

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: ROBERT R. ADAMS 04/22/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPST () Delete INFANTE, MAURICIO D Name: 1200 BRICKELL AVE STE 900

City-St-Zip: MIAMI, FL 33131

Address:

DVST Title: () Delete Name: SENOSIAIN, MARIA C

1200 BRICKELL AVE STE 900 Address:

MIAMI, FL 33131 City-St-Zip:

() Delete Title: DVST FERNANDEZ, MARIA C Name: 1200 BRICKELL AVE STE 900 Address:

City-St-Zip: MIAMI, FL 33131

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change () Addition

INFANTE, MAURICIO D Name: 1000 BRICKELL AVE STE 300 Address:

City-St-Zip: MIAMI, FL 33131

Title: DVST (X) Change () Addition

Name: SENOSIAIN, MARIA C

1000 BRICKELL AVE STE 300 Address:

MIAMI, FL 33131 City-St-Zip:

Title: DVST (X) Change () Addition

Name: FERNANDEZ, MARIA C 1000 BRICKELL AVE STE 300 Address:

City-St-Zip: MIAMI, FL 33131

I hereby certify that the information supplied with this filing does not qualify 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: MAURICIO D. INFANTE P/D 04/22/2008