2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000072182

Entity Name: VIP PROPERTY MANAGEMENT SPECIALISTS, INC.

FILED Apr 25, 2005 Secretary of State

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

2531 ARAGON BLVD FORT LAUDERDALE, FL 33322

Current Mailing Address: New Mailing Address:

2531 ARAGON BLVD SUNRISE, FL 33322

FEI Number: 04-3765965 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:

SCHNARTMAN, TRACEY
2531 ARAGON BLVD
2531 ARAGON BLVD

FORT LAUDERDALE, FL 33322 US FORT LAUDERDALE, FL 33322 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: TRACEY GELLER-SCHNAITMAN 04/25/2005

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition Name: GELLER, ELAINE B Name: GELLER-SCHNAITMAN, TRACEY S

 Address:
 3536 NW 73 WAY
 Address:
 2531 ARAGON BLVD.

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 SUNRISE, FL 33322

Title: DVST (X) Delete Title: () Change () Addition

 Name:
 GELLER, IRWIN B
 Name:

 Address:
 3536 NW 73 WAY
 Address:

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:

Title: D (X) Delete Title: () Change () Addition

 Name:
 SCHNARTMAN, TRACEY
 Name:

 Address:
 2531 ARAGON BLVD
 Address:

 City-St-Zip:
 FORT LAUDERDALE, FL 33322
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: TRACEY GELLER-SCHNAITMAN P 04/25/2005