2005 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

PED OR PRINTED NAME OF SIG

Secretary of State DOCUMENT # P03000086061 03-31-2005 90056 034 ***150.00 E & Z PROPERTY HOLDINGS, INC. Principal Place of Business Mailing Address 500 VONDERBERG DR., #102 EAST 500 VONDERBERG DR., #102 EAST 50032717 BRANDON, FL 33511 BRANDON, FL 33511 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03162005 CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 20-0172017 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name MILIAN, MARY H ESQ. Street Address (P.O. Box Number is Not Acceptable) 7500 S.W. 53 PLACE (ADDRESS CHANGE) MIAMI, FL 33143 Zip Code 33/5 PALMETTO BAY 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. 1 am familiar with, and accept the obligations of registered attent 3-16-05 SIGNATURE. egistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 Change TITLE ☐ Delete Title ■ Addition ZUMPAN, ANTONIO V. NAME ZUMPANO, ANTONIO V 500 VUNDERBURG DR STE 102 STREET ADDRESS 5805 AUDUBON MANOR BLVD. STREET ADDRESS CITY-ST-ZIP LITHIA, FL 33547 CITY-ST-ZIP BRANDIN FL 33511-5968 TITLE STD ☐ Delete TITLE: Change ☐ Addition ENRIEUEZ, SULIO A. NAME **ENRIQUEZ, JULIO A** SOU VONOERBURG DR STE 102 13305 WATERFORD RUN STREET ADDRESS STREET ADDRESS CITY-ST-ZIP RIVERVIEW, FL 33569 CITY-ST-7IP BMANDON AL 33511-5968 TITLE ☐ Delete TITLE ■ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 all address, with all other like empowered.

FILED Mar 31, 2005 8:00 am

Daytime Phone #