2005 FOR PROFIT CORPORATION ANNUAL REPORT

AND PYCEDO

SECRETARY OF STATE DIVISION OF CURPORATIONS DOCUMENT # P03000106943 1. Entity Name 05 SEP -6 AM 11:39 BAHIA HONDA REAL ESTATE INVESTMENTS VII, INC. Principal Place of Business Mailing Address 2450 SW 137TH AVE., SUITE 228 2450 SW 137TH AVE., SUITE 221 MIAMI, FL 33175-MIAMI-FL-33175 Principal Place of Business 3. Mailing Address 000 Porce de Leon Blud 600 Ponce de Lon Bled. 06292005 Cha-P CR2E034 (10/03) 4. FEI Number Applied For 90-0120047 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name A&A REGISTERED AGENT, INC. Street 2450 SW 137TH AVE., SUITE 221 MIAMI, FL -33175 City Œ 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 regis red agent. SIGNATURE. gistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE 15,\$150.00 \$5.00 May Be in accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. Due by September 7, 2005 Added to Fees corporation did not receive the prior notice. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TATLE Change ☐ Addition NAME ADRIAN, PEDRO J NAME 4000 Ponce de Leon Blub #770 STREET ADDRESS -2450 SW 137TH AVE SUITE 228 STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33175 CITY-SI-ZIP oral Gables, FL 33146 TITLE ☐ Delete TITLE 300059550503 Addition NAME NAME 09/13/05--01010--006 **150.80 STREET ADDRESS STREET ADDRESS CITY-S1-ZIP CITY-ST-ZIP ☐ 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-S1-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition 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 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report of 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 attac acidress, with SIGNATURE

FILED

Date

Daytime Phone #