2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P04000139730

Entity Name: FISHER ISLAND INVESTMENTS, INC.

FILED Apr 25, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: ONE FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 **Current Mailing Address: New Mailing Address:** ONE FISHER ISLAND DRIVE FISHER ISLAND, FL 33109 FEI Number: 20-1953574 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: DE LA CRUZ, LUIS F JR 2 ALHAMBRÁ PLAZA PH-2C US CORAL GABLES, FL 33134 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: C/D () Delete () Change () Addition Name: KAY, JOSEPH Name: ONE FISHER ISLAND DRIVE Address: Address: City-St-Zip: FISHER ISLAND, FL 33109 US City-St-Zip: Title: Title: () Delete (X) Change () Addition Name: DENAIN, CEDRIK Name: FONG, MICHAEL ONE FISHER ISLAND DRIVE ONE FISHER ISLAND DRIVE Address: Address: FISHER ISLAND, FL 33109 US FISHER ISLAND, FL 33109 US City-St-Zip: City-St-Zip: Title: VP. () Delete Title: () Change () Addition SILVA, GAELE Name: Name: ONE FISHER ISLAND DRIVE Address: Address: FISHER ISLAND, FL 33109 US City-St-Zip: City-St-Zip: Title: () Delete Title: () Change () Addition SOSA, ROBERTO Name: Name: ONE FISHER ISLAND DRIVE Address: Address: City-St-Zip: FISHER ISLAND, FL 33109 US City-St-Zip: Title: Title: () Delete () Change () Addition DIEUDE, CARINE Name: Name: ONE FISHER ISLAND DRIVE Address: Address: City-St-Zip: FISHER ISLAND, FL 33109 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: HAY, SUZANNE M Name: HAY, SUZANNE M 2711 CENTERVILLE ROAD, SUITE 400 2711 CENTERVILLE ROAD, SUITE 400 Address: Address: City-St-Zip: WILMINGTON, DE 19808 US City-St-Zip: WILMINGTON, DE 19808 US

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: ROBERTO SOSA T 04/25/2007