## 2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P05000057563

Entity Name: MIRAMAR I GP, INC.

FILED May 24, 2007 Secretary of State

Current Principal Place of Busi	ness: New	Principal Place of Bus	siness:
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5101 NW 21ST AVE. 5101 NW 21ST AVE.

SUITE 300 SUITE 345

FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309

Current Mailing Address: New Mailing Address:

5101 NW 21ST AVE. 5101 NW 21ST AVE.

SUITE 300 SUITE 345

FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309

FEI Number: 20-2827472 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:

SANTOLLA, STEVEN
5101 N.W. 21ST AVE
SUITE 300

SANTOLLA, STEVEN
5101 N.W. 21ST AVE
SUITE 345

FORT LAUDERDALE, FL 33309 US FORT LAUDERDALE, FL 33309 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: 05/24/2007

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 SANTOLLA, STEVEN
 Name:
 SANTOLLA, STEVEN

 Address:
 5101 N.W. 21ST AVE STE 300
 Address:
 5101 N.W. 21ST AVE STE 345

 City-St-Zip:
 FORT LAUDERDALE, FL 33308
 City-St-Zip:
 FORT LAUDERDALE, FL 33309

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

Name: LINAN, THOMAS Name: LIHAN, THOMAS

Address: 2455 EAST SUNRISE BOULEVARD, SUITE AR1 Address: 5101 N.W. 21ST AVE STE 345 City-St-Zip: FORT LAUDERDALE, FL 33304 City-St-Zip: FORT LAUDERDALE, FL 33309

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

Name: JAZAYRI, SAM

Address: 3001 W. HALLANDALE BEACH BLVD STE 300

City-St-Zip: City-St-Zip: PEMBROKE PARK, FL 33009

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: THOMAS LIHAN D 05/24/2007