

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P05000063583

**FILED**  
**Jan 18, 2011**  
**Secretary of State**

**Entity Name:** OLIVE TREE PROPERTIES, INC.

**Current Principal Place of Business:**

4818 MISTY PINES TRAIL  
LAKE WORTH, FL 33463

**New Principal Place of Business:**

184 SANTA BARBARA WAY  
PALM BEACH GARDENS, FL 33410

**Current Mailing Address:**

4818 MISTY PINES TRAIL  
LAKE WORTH, FL 33463

**New Mailing Address:**

184 SANTA BARBARA WAY  
PALM BEACH GARDENS, FL 33410

**FEI Number:** 20-2802188

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LONGO, DOMINIC  
184 SANTA BARBARA WAY  
PALM BEACH GARDENS, FL 33410 US

**Name and Address of New Registered Agent:**

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:**

Title: D  
Name: SHRAITEH, AKRAM  
Address: 4818 MISTY PINES TRAIL  
City-St-Zip: LAKE WORTH, FL 33463

Title: D  
Name: LONGO, DOMINIC  
Address: 184 SANTA BARBARA WAY  
City-St-Zip: PALM BEACH GARDENS, FL 33410

I hereby 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 all other like empowered.

SIGNATURE: DOMINIC M LONGO

PRES

01/18/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date