

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000071648

Entity Name: 3203 VISTA TRACE, INC.

FILED  
Jan 15, 2008  
Secretary of State

## Current Principal Place of Business:

5481 NORTH BAY ROAD  
MIAMI BEACH, FL 33140

## New Principal Place of Business:

## Current Mailing Address:

5481 NORTH BAY ROAD  
MIAMI BEACH, FL 33140

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SEGAL, JONATHAN  
5481 NORTH BAY ROAD  
MIAMI BEACH, FL 33140 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: SEGAL, AMY  
Address: 5481 NORTH BAY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: VP ( ) Delete  
Name: SEGAL, JONATHAN  
Address: 5481 NORTH BAY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: TR ( ) Delete  
Name: SEGAL, AMY  
Address: 5481 NORTH BAY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

Title: SEC ( ) Delete  
Name: SEGAL, JONATHAN  
Address: 5481 NORTH BAY ROAD  
City-St-Zip: MIAMI BEACH, FL 33140

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JONATHAN W SEGAL

VP

01/15/2008

Electronic Signature of Signing Officer or Director

Date