2007 FOR PROFIT CORPORATION

May 01, 2007 8:00 am Secretary of State ANNUAL REPORT 05-01-2007 90057 005 ***150.00 DOCUMENT # P05000105436 1. Entity Name GREENBRIAR REAL ESTATE HOLDINGS, INC. Principal Place of Business Mailing Address 40096896 701 W. CYPRESS CREEK ROAD 701 W. CYPRESS CREEK ROAD SUITE 302 SUITE 302 FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01172007 CR2E034 (12/06) Chg-P Applied For City & State City & State 4. FEI Number 84-1686354 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KODSI LAW FIRM, P.A. 701 W. CYPRESS CREEK ROAD Street Address (P.O. Box Number is Not Acceptable) SUITE 303 FORT LAUDERDALE, FL 33309 Zip Code City FL 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 registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. P/D Delete Addition TITLE TITLE Scan Tonner KODSI, ISAAC NAME NAME 701 W Cypiess Cot Rd Suite 301 STREET ADDRESS 701 W. CYPRESS CREEK ROAD, SUITE 302 STREET ADDRESS FORT LAUDERDALE, FL 33309 CITY-ST-ZP 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 COTY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change ☐ Addition NAME NAME

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 emonwered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if with all other like empowered changed, or on an attachme

STREET ADDRESS CITY-ST-7IP

SIGNATURE:

STREET ADORESS

CITY-ST-7IP