

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000113111

Entity Name: GET PROPERTIES, INC.

FILED  
Feb 12, 2006  
Secretary of State

## Current Principal Place of Business:

10 VENETIAN WAY APT 2404  
MIAMI BEACH, FL 33139

## New Principal Place of Business:

10 VENETIAN WAY  
APT 2404  
MIAMI BEACH, FL 33139

## Current Mailing Address:

10 VENETIAN WAY APT 2404  
MIAMI BEACH, FL 33139

## New Mailing Address:

10 VENETIAN WAY  
APT 2404  
MIAMI BEACH, FL 33139

FEI Number: 14-3485927

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROTHLEIN, JAY ESQ  
930 WASHINGTON AVENUE SUITE 209  
BANK OF AMERICA  
MIAMI BEACH, FL 33139 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: PTD ( ) Delete  
Name: THOMPSON, GAIL L  
Address: 10 VENETIAN WAY APT 2404  
City-St-Zip: MIAMI BEACH, FL 33139

Title: VSD ( ) Delete  
Name: TURNER, TRACEY L  
Address: 78 PURGATORY FALLS RD FARMSIDE FARMS  
City-St-Zip: LYNDENBOROUGH, NH 03082

Title: D ( ) Delete  
Name: THOMPSON, EVE A  
Address: 10 VENETIAN WAY APT 2404  
City-St-Zip: MIAMI BEACH, FL 33139

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change ( ) Addition  
Name: THOMPSON, EVE A  
Address: 10 VENETIAN WAY APT 1902  
City-St-Zip: MIAMI BEACH, FL 33139

I hereby certify that the information supplied with this filing does not qualify for the 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: GAIL L. THOMPSON

PTD

02/12/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date