2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008
Secretary of State

DOCUMENT# P05000113111

Entity Name: GET PROPERTIES, INC.

Current Principal Place of Business:

10 VENETIAN WAY
APT 2404
MIAMI BEACH, FL 33139

New Principal Place of Business:

Current Mailing Address:

10 VENETIAN WAY
APT 2404
MIAMI BEACH, FL 33139

New Mailing Address:

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
THE SOUTH BAY CLUB - 800 WEST AVENUE
SUITE C-1
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 FARSIDE FARMS
City-St-Zip: LYNDEBOROUGH, NH 03082

Title: D ( ) Delete
Name: THOMPSON, EVE A
Address: 1601 LENOX AVENUE, UNIT 4
City-St-Zip: MIAMI BEACH, FL 33139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VSD (X) Change ( ) Addition
Name: TURNER, TRACEY L
Address: 78 PURGATORY FALLS RD FARSIDE FARM
City-St-Zip: LYNDEBOROUGH, NH 03082

Title: D (X) Change ( ) Addition
Name: THOMPSON, EVE A
Address: 1601 LENOX AVENUE, UNIT 1
City-St-Zip: MIAMI BEACH, FL 33139

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: GAIL L. THOMPSON PTD 01/07/2008

Electronic Signature of Signing Officer or Director — Date