2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2009
Secretary of State

DOCUMENT# P07000049991

Entity Name: MIAMI BEACH PROPERTY MANAGEMENT, INC.

Current Principal Place of Business:

8101 HARDING AVE.
MIAMI BEACH, FL 33141

New Principal Place of Business:

Current Mailing Address:

8101 HARDING AVE.
MIAMI BEACH, FL 33141

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:

FAYETTE, GARY W
8101 HARDING AVE.
MIAMI BEACH, FL 33141 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: PD ( ) Delete
Name: FAYETTE, GARY W
Address: 8101 HARDING AVE.
City-St-Zip: MIAMI BEACH, FL 33141

Title: VD ( ) Delete
Name: SIMMONS, SHAWN R
Address: 16192 COASTAL HWY.
City-St-Zip: LEWES, DE 19958

Title: STD ( ) Delete
Name: KINNEER, MICHAEL E
Address: 867 DENNISON AVE.
City-St-Zip: COLUMBUS, OH 43215

Title: D ( ) Delete
Name: WYNN, KELLY
Address: 275 NE 45TH ST.
City-St-Zip: MIAMI, FL 33137

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: GARY W. FAYETTE PD 04/15/2009

Electronic Signature of Signing Officer or Director — Date