2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000073233

AVENTURA, FL 33180

City-St-Zip:

Entity Name: LAS OLAS FIRST DEVELOPMENT FOUR CORP

FILED Apr 29, 2008 Secretary of State

Entity Name: LAS OL	AS FIRST DEVELOPMENT FOR	JR CORP.		
Current Principal Place of Business:		New Principal Place of	New Principal Place of Business:	
2875 NE 191 ST., 300 AVENTURA, FL 33180		2875 NE 191 ST., SUITE 801 AVENTURA, FL 33180		
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
2875 NE 191 ST., 300 AVENTURA, FL 33180		2875 NE 191 ST., 801 AVENTURA, FL 33180		
FEI Number:	FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of	Current Registered Agent:	Name and Address of	Name and Address of New Registered Agent:	
SERBER, DANIEL J. E 2875 NE 191 ST., STE. C/O SERBER & ASSO AVENTURA, FL 33180	801 CIATES, P.A.			
The above named entity in the State of Florida.	y submits this statement for the p	ourpose of changing its registered	office or registered agent, or both,	
SIGNATURE:				
Electronic Signature of Registered Agent		ent	Date	
Election Campaign Financi	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: D (() Delete	Title: D (2	X) Change () Addition	

Name: BRAVER, JORGE Name: ARIE, SHAVIT 2875 NE 191 ST., 300 Address: 2875 NE 191 ST., 801 Address: City-St-Zip: AVENTURA, FL 33180 City-St-Zip: AVENTURA, FL 33180 Title: () Delete Title: (X) Change () Addition SIMONE, HORACIO SIMONE, HORACIO Name: Name: Address: 2875 NE 191 ST., 300 Address: 2875 NE 191 ST., 801

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.

City-St-Zip:

AVENTURA, FL 33180

SIGNATURE: ARIE SHAVIT D 04/29/2008