2008 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Feb 06, 2008 08:00 AM Secretary of State **DOCUMENT # P07000089747** FIVE BROTHERS REAL ESTATE CORPORATION Principal Place of Business Mailing Address 8372 NW 64TH STREET P.O. BOX 43-0456 MIAMI, FL 33166 US SOUTH MIAMI, FL 33243 US 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01312008 CR2E034 (12/06) Chg-P City & State City & State 4. FEI Number Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HERNANDEZ, IRENE V Street Address (P.O. Box Number is Not Acceptable) 8378 NW 64TH STREET MIAMI, FL 33166 Zip Code 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) DATE \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2008 Fee will be \$550.00 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PD TITLE Delete TITLE Addition | ☐ Change 000000817596 02/15/08-80009-010 150.00 NAME FONTOURA, THIAGO V STREET ADDRESS RUA CORONEL BENTO NORONHA, NO.153 STREET ADDRESS CITY-ST-77P SAO PAULO, BRASIL, N/ N/A CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME FONTOURA, ABILIO MAME STREET ADDRESS RUA CORONEL BENTO NORONHA, NO.153 STREET ADDRESS CITY-ST-ZIP SAO PAULO, BRASIL, N/ N/A CITY-ST-ZIP VPD TITLE Delete TITLE ■ Addition Change SANTOS DA FONTOURA, FERNANDO NAME NAME RUA CORONEL BENTO NORONHA, NO.153 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SAO PAULO; BRASIL, N/ N/A CCTY-ST-7IP TITLE ☐ Delete TITI F ☐ Change ☐ Addition HERNANDEZ, IRENE V NAME STREET ADDRESS 8378 NW 64TH STREET STREET ADDRESS CITY-ST-7IP MIAMI, FL 33166 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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 empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

FILED