2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

SIGNATURE: 2

Apr 09, 2004 8:00 am Secretary of State DOCUMENT # P93000055716 04-09-2004 90075 007 ***150.00 1. Entity Name PALM BEACH LANDMARK PROPERTIES, INC. Principal Place of Business Mailing Address **エエレいいりエエ** 7401 WEST-MCNAB RD. SUITE 201 *7101 WEST MCNAB RD. SUITE 201 TAMARAC, FL 33321 TAMARAC, FL 33321 3. Mailing Address 44 Cocoanut Row 2. Principal Place of Business 205 WORTH Suite, Apt. #, etc. e, Apl. #. etc B - 301 01062004 CR2E034 (10/03) Chq-P SUITE 4. FEI Number Applied For BEACH FL ALM BEACH 65-0476278 Not Applicable Country S A \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HIRSCH, JAY I Street Address (P.O. Box Number is Not Acceptable) 44 COCOANUT ROW. #B-301 PALM BEACH, FL 33480 Zip Code FL 8. The above named entity submits this statement for the purpose of changing its registered office opregistered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent PRESIDEN (NOTE: Re quired when reinstaling) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2004 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 DPS TITLE Defete TITLE Change ☐ Addition HIRSCH, JAY I NAME NAME 44 COCOANUT ROW A-121 STREET ADDRESS STREET ADDRESS 44 COCOANUT ROW #B-301 PALM BEACH, FL 33480 CITY-ST-ZIP CITY-ST-ZIF □ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Defete TITLE Change ☐ Addition NAME NAME-STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-7IP I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplier and pour is true and occurate 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 of executed 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 attagrament with an appears, with all other like empowered.

JAY HIRSCH,

FILED

Daytime Phone #