

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000084249

FILED
Mar 05, 2003
Secretary of State

Entity Name: PROPERTY ONE, INC.

Current Principal Place of Business:

3475 W. FLAGLER STREET
2ND FLOOR
MIAMI, FL 33135

New Principal Place of Business:

Current Mailing Address:

3475 W. FLAGLER STREET
2ND FLOOR
MIAMI, FL 33135

New Mailing Address:

FEI Number: 65-0616306

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SCHIAFKE, MARIA D
5415 W FLAGLER ST
MIAMI, FL 33135 US

Name and Address of New Registered Agent:

SCHLAFKE, MARIA D
3475 W FLAGLER ST
MIAMI, FL 33135 US

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: MARIA D SCHLAFKE

03/05/2003

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SCHLAFKE, MARIA D
Address: 3475 W. FLAGLER STREET
City-St-Zip: MIAMI, FL 33135

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP () Change (X) Addition
Name: SCHLAFKE, WILLIAM J
Address: 3475 W FLAGLER ST
City-St-Zip: MIAMI, FL 33135

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MARIA D SCHLAFKE

P

03/05/2003

Electronic Signature of Signing Officer or Director

Date