2006 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

DOCUMENT # P96000027309 FILED 1. Entity Name HIALEAH REAL PROPERTIES, INC. 06 HAR 17 PH 4: 17 Principal Place of Business Mailing Address -SECRETARY OF STATE FALLAHASSEE, FLORIDA 13737 NOEL ROAD 13737 NOEL ROAD **STE 100 STE 100** DALLAS, TX 75240 DALLAS, TX 75240 2. Principal Place of Business 3. Mailing Address CR2E034 (11/05) Suite, Apt. #, etc. Suite, Apt. #, etc. Chg-P 02212006 City & State City & State 4. FEI Number Applied For 75-2653767 Not Applicable 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 C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 City 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 agen1 and title ill applicable. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME FERNANDEZ, AURELIO NAME STREET ADDRESS 651 EAST 25TH STREET STREET ADDRESS CITY-ST-ZIP HIALEAH, FL 33013 CITY-ST-ZIP SD SD XXChange TITLE TITI F Delete Addition Larsen, Caitlin NAME LARSEN, CAITLIN M NAME STREET ADDRESS 3820 STATE STREET STREET ADDRESS 13737 Noe1 Rd Ste 100 CITY-ST-ZIP SANTA BARBARA, CA 93105 CITY-ST-7IP Dallas TX 75240 ☐ Delete TITLE TITLE **XX**Change ☐ Addition NAME DENT, DENNIS L NAME Sherman, Jeffrey S. STREET ADDRESS 3820 STATE STREET STREET ADDRESS 13737 Noel Rd Ste 100 Dallas TX 75240 CITY-ST-ZIP SANTA BARBARA, CA 93105 CITY-ST-7IP TITLE AS ☐ Delete TITLE ÁS Change ☐ Addition NAME MACK, KRISTINA A NAME Mack, Kristina A 3820 STATE STREET STREET ADDRESS STREET ADDRESS 13737 Noel Rd Ste 100 CITY-ST-ZIP SANTA BARBARA, CA 93105 CITY-ST-ZIP <u>Dallas TX 75240</u> TITLE Delete TITLE Change ☐ Addition NAME NAME 900068544929 03/23/06--01052--019 **15 STREET ADDRESS STREET ADDRESS **150.00 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

MAR 1 7 2006

Caitlin Larsen 2/24/06 469-893-2701