2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

Feb 17, 2003 8:00 am **Secretary of State** P96000083771 DOCUMENT # 1. Entity Name 02-17-2003 90266 008 ***150.00 LANDMARK FLORIDA REALTY, INC. Principal Place of Business Mailing Address 2600 S.W. 3RD AVENUE 2600 S.W. 3RD AVENUE 750 MIAMI FL 33129 MIAMI FL 33129 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number Applied For 65-0715216 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 PEREZ, WILLIAM I Street Address (P.O. Box Number is Not Acceptable) **4921 MONROE ST** HOLLYWOOD FL 33021 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 agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS 11, ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE ☐ Delete TITLE Change ☐ Addition NAME PEREZ, WILLIAM I NAME STREET ADDRESS 2600 SW 3RD AVE, STE 750 STREET ADDRESS CITY-ST-ZIP **MIAMI FL 33129** CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete 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 TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

plied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information apport 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 are proposed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

SIGNATURE

12. I hereby certify that the information s indicated on this report or supplement

of the corporation or the rec changed, or on an attachma

JAI WIELIAMRIEREREZRED PRESIDENT URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (10/02)

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