2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P96000084101

FILED Jan 20, 2008 Secretary of State

Entity Name: PELICAN HARBOUR MANAGEMENT, INC.							
Current Principal Place of Business:			New Prince	New Principal Place of Business:			
500 NE 18 MIAMI, FL	5 STREET 33179 US						
Current Mailing Address:				New Mailing Address:			
900 BAY D MIAMI BEA	DR PH 1 ACH, FL 33141						
FEI Number:	: 65-0709731	FEI Number Applied For ()	FEI Number Not App	olicable ()	Certificate of Status Desire	d ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
BERSON LEVINSON, JUDITH DR 900 BAY DR PH 1 MIAMI BEACH, FL 33141 US			900 BAY [BERSON LEVINSON, JUDI DR 900 BAY DR PH 1 MIAMI BEACH, FL 33141 US			
	named entity s e of Florida.	ubmits this statement for the	purpose of changing	its registered o	office or registered agent,	or both,	
SIGNATURE: JUDI BERSON-LEVINSON				01/20/2008			
Electronic Signature of Registered Agent				Date			
Election Car	npaign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PRES () LEVINSON, STE 900 BAY DRIVE MIAMI BEACH, F	PH 1	Title: Name: Address: City-St-Zip:	() Change ()Addition		
Title: Name: Address: City-St-Zip:	` '		Title: Name: Address: City-St-Zip:	VP (X BERSON LEVI 900 BAY DRIV MIAMI BCH, FI	E PH 1		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	TREA (LEVINSON, TA 500 NE 185 ST MIAMI, FL 33	TREET		
Title: Name: Address: City-St-Zip:	()	Delete	Title: Name: Address: City-St-Zip:	SECT (BERSON-LEVI 900 BAY DRIV MIAMI BEACH	E PH 1		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JUDI BERSON-LEVINSON VΡ 01/20/2008