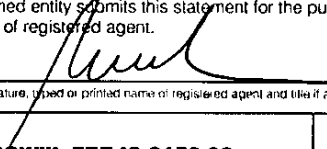
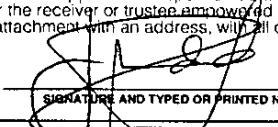


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90276 043 ***150.00

DOCUMENT # P97000031087 1. Entity Name WARREN LANE REALTY CORP.					
Principal Place of Business 848 BRICKELL AVE PENTHOUSE I MIAMI, FL 33131			Mailing Address 848 BRICKELL AVE SUITE 700 MIAMI, FL 33131		
2. Principal Place of Business 848 Brickell Ave		3. Mailing Address			
Suite, Apt. #, etc. 700		Suite, Apt. #, etc.			
City & State Miami FL		City & State			
Zip 33131		Country USA		Zip	
Country		4. FEI Number 65-0751272			
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent MURAI, WALD, BIONDO & MORENO, P.A. 900 INGRAHAM BLDG. 25 SOUTHEAST 2ND AVE. MIAMI, FL 33131			7. Name and Address of New Registered Agent Name Murai Wald Biondo Moreno & Borchin P.A. Street Address (P.O. Box Number is Not Acceptable) Two Alhambra Plaza Penthouse 1 B City Coral Gables FL Zip Code 33134		
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  Rene V. Murai 4/21/05 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ARDID, JOSE M 848 BRICKELL AVE, SUITE 700 MIAMI, FL 33131 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D INIGO, ARDIO 848 BRICKELL AVE SUITE 700 MIAMI, FL 33131 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DIEGO, ARDID 848 BRICKELL AVE SUITE 700 MIAMI, FL 33131 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. 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 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.					
SIGNATURE:  Jose Ardid 4/18/05 305-377-1001 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			