2005 FOR PROFIT CORPORATION

FILED Apr 11, 2005 08:00 AM Secretary of State ANNUAL REPORT DOCUMENT # P97000031676 1. Entity Name SUNMARK PROPERTIES, INC. Principal Place of Business __ Mailing Address 800 WEST CYPRESS CREEK ROAD 800 WEST CYPRESS CREEK ROAD SUITE 350 SUITE 350 FORT LAUDERDALE, FL 33309 FORT LAUDERDALE, FL 33309 04072005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0743607 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent KRINSKY, JAY 800 WEST CYPRESS CREEK ROAD DO NOT WRITE SUITE 350 IN THIS SPACE FORT LAUDERDALE, FL 33309 8. The above named entity submits this statement for the purpose of changing its registered office of 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE 18 \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. DPT TITLE KRINSKY, JAY NAME 800 WEST CYPRESS CREEK ROAD SUITE 350 STREET ADDRESS FORT LAUDERDALE, FL 33309 CITY-ST-ZIP TITLE 04/11/05-80013-015 150.00 KRINSKY, BARRY B NAME STREET ADDRESS 800 WEST CYPRESS CREEK ROAD SUITE 350 CITY-ST-ZIP FORT LAUDERDALE, FL 33309 TITLE NAME POLLOCK, EDWARD J STREET ADDRESS 800 WEST CYPRESS CREEK ROAD SUITE 350 DO NOT WRITE FORT LAUDERDALE, FL 33309 CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing odes 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP