2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P97000054574

Entity Name: 729-731 WASHINGTON AVE., PROPERTY, INC.

FILED Jun 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3191 CORAL WAY **SUITE 1008** MIAMI, FL 33145 **New Mailing Address: Current Mailing Address:** 3191 CORAL WAY #1008 MIAMI, FL 33145 FEI Number: 65-0762784 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: STONE, DAVID E SOSTCHIN, HENRIETTA 640 NE 176 ST 640 NE 176 ST MIAMI, FL 33162 US MIAMI, FL 33162 US 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. SIGNATURE: HENRIETTA SOSTCHIN 06/05/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: (X) Change () Addition () Delete Title: SOSTCHIN, HENRIETTA SOSTCHIN, BURL Name: Name: 640 NW 176ST 3191 CORAL WAY SUITE 1008 Address: Address: City-St-Zip: MIAMI, FL 33162 City-St-Zip: MIAMI, FL 33162 Title: SVP Title: DVST () Delete (X) Change () Addition

Name:

Address:

City-St-Zip:

Title: () Delete Name:

VIVES, GRACE

MIAMI, FL 33145

3191 CORAL WAY #1008

Address City-St-Zip:

Title: () Delete

Address: City-St-Zip:

City-St-Zip:

Name:

Name:

Address:

City-St-Zip:

Title:

() Delete

Name: Address: Title: () Change (X) Addition SOSTCHIN, HENRIETTA Name: 3191 CORAL WAY SUITE 1008 Address: City-St-Zip: MIAMI, FL 33145 Title: () Change (X) Addition

3191 CORAL WAY #1008

SOSTCHIN, DANA Name: Address: 3191 CORAL WAY SUITE 1008

VIVES, GRACE

MIAMI, FL 33145

City-St-Zip: MIAMI, FL 33145

Title: () Change (X) Addition

PERCAL, IDA Name:

Address: 3191 CORAL WAY SUITE 1008

City-St-Zip: MIAMI, FL 33145

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: BURL SOSTCHIN DP 06/05/2008